Stroke Communication Strategies and Tools

There is great potential for improving stroke-related policy and environmental support through effective use of communication strategies and tools. A first step is for people at greatest risk for stroke and those around them to know the signs and symptoms of stroke and to be aware of the importance of acting quickly. A second step is for health care providers to understand the burden of stroke and know how to reduce that burden by creating stroke centers, protocols, and systems.
THE KEY TO A SUCCESSFUL COMMUNICATION EFFORT is to use available communication tools and tactics in support of a larger strategic approach. All program strategies should support specific program goals and objectives. (Refer to Chapters 4–6 of the Communication Guide for an extensive discussion about how to develop communication strategies to influence policy and environmental goals related to heart disease and stroke.) As described in the Communication Guide, the process of strategy development includes the following:

- segmenting target audiences and identifying primary and secondary audiences;
- gathering and assessing information about target audiences, such as current perceptions and beliefs, trusted sources of information, and barriers to change;
- determining the most appropriate communication channels for reaching a target audience;
- framing program messages;
- detailing an approach to conduct formative, process, and outcome evaluations of programs; and
- drafting a communication plan to serve as a road map for communication activities.

Once a strategy has been established, it is possible to select communication tactics that offer the greatest potential for success. For example, if one strategy is to use stroke mortality data to build support for state-based policy development on 9-1-1 coverage, a communication tactic in support of the strategy could be using stroke data to develop a briefing document for policy makers.

In this chapter addendum is an expansion of the communication tools and resources in the Communication Guide to provide additional stroke-specific tools to support communication strategies. In many cases, these materials include placeholders for inserting local data and statistics to reinforce central messages.

The CDC’s Atlas of Stroke Mortality and state cardiovascular health burden documents provide information. In addition, CDC is planning publication on the CVH Website (www.cdc.gov/cvh) of the Atlas of Stroke Hospitalizations in 2005; this resource should provide additional state- and county-based data on stroke. The health care organizations on a communication task force can be helpful in identifying patient success stories to help bring to life the problem of stroke and its solutions for a reporter or editor and to facilitate a news story.
Chapter 5: Working with the Media to Implement the Plan

ADDENDUM 1: STROKE COMMUNICATION STRATEGIES AND TOOLS

THIS CHAPTER ADDENDUM CONTAINS

- A model rollout plan for a state stroke burden report;
- A sample press release for Stroke Awareness Month in May; and
- A sample op-ed piece for local publications.

MODEL ROLLOUT PLAN FOR STATE STROKE BURDEN REPORT

Stroke burden documents provide an opportunity for a policy-related communication intervention. These data can motivate key partners and provide material for media outreach, presentations, and public education. A well-planned rollout for a stroke burden document can help raise visibility for a state program and the issues it addresses.

The best way to elicit news coverage and interest from key opinion leaders is to link the report’s release to another newsworthy event. For example, the report could be released at a meeting of the state’s public health or hospital association so reporters covering the event will already be on hand. Or, the release could be tied to a state legislative health day or governor’s health event. If possible, the report should offer a news angle for Stroke Awareness Month outreach. A state program could consider holding a press conference to release the report during or just before a Stroke Awareness Month screening event conducted by one of its partners to garner media interest and leverage partners’ efforts.

It is essential to work with the health department’s communications office to obtain appropriate clearances for media outreach. In most cases, if the communications officers find the burden report release newsworthy, they will take on many of the tasks related to materials development and logistics planning as outlined in the next section. In addition, they can help engage high-level state officials to participate in the announcement.
Below is a model communication plan for announcing the publication of a state’s stroke plan through a press conference and other media outreach.

**ACTIVITIES**

| **Partner Outreach** | Research and compile lists of desired partners.  
                          Contact and secure support from partners that are involved in the stroke community.  
                          Define each partner’s role in contributing to the event. |
|----------------------|------------------------------------------------------------------|
| **Press Conference Planning** | Secure site and necessary materials for event.  
                                    Plan and draft program.  
                                    Select and invite speakers.  
                                    Compose lists of media/general invitees.  
                                    Send necessary documents (e.g., talking points, stroke burden documents, contact lists) to parties involved with event. |
| **Media Materials** | Provide copies of the following for assembled media representatives:  
                        - Media advisory,  
                        - Press release,  
                        - Information sheets (e.g., question-and-answer sheets, fact sheets),  
                        - Biographical information for notables at press conference, and  
                        - Press kits. |
| **Media Outreach** | Compile contact lists of target media, organizations, and audiences.  
                       Use media materials appropriate for target audiences.  
                       Gather interesting stories and contacts to attract media.  
                       Create ways to monitor and evaluate media stories about the event. |

**TIMELINE**

| **One Month Prior to Launch** | Share embargoed report with key partners.  
                                   Notify state’s communications office and request assistance in an announcement.  
                                   Draft media advisory and press release and submit to communications office for clearance. |
|------------------------------|----------------------------------------------------------------------------------|
| **Two Weeks Prior to Launch** | Select speakers for press conference. Include state cardiovascular health staff, key medical and disease group partners, stroke champions, and coalition members.  
                                 Consider identifying a stroke patient in the state who benefited from the state’s stroke system. Patients are particularly important for television coverage.  
                                 Collect biographical information from speakers for introductions at press conference.  
                                 Share draft media materials with key partners for review.  
                                 Reserve space for press conference.  
                                 Reserve proper audiovisual systems (e.g., microphone, computer, slide or LCD projector).  
                                 Patients are particularly important for television coverage. Be sure to have an appropriate release form signed by the patient. |
### Chapter 5: Working with the Media to Implement the Plan

#### ADDENDUM 1: STROKE COMMUNICATION STRATEGIES AND TOOLS

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<th>Time Period</th>
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| **One Week Prior to Launch** | Write talking points for all speakers to ensure they provide different information and highlight different key findings.  
Begin assembling press kits. Include the release, speaker biographical sketches, and fact sheets about the state's Heart Disease and Stroke Prevention Program.  
Deliver the media advisory and embargoed stroke reports to state legislators, especially those who are serving on health committees or who are interested in heart disease and stroke. Include a letter stating that program staff are available to provide background or testimony about the report's content and other cardiovascular health issues.  
Contact talk radio shows that interview guests to schedule interviews immediately following the press briefing. Provide an executive summary of the stroke report but emphasize that it is embargoed until the day of the press conference.  
Invite members on stroke councils or coalitions to attend the press conference. |
| **Day Before Launch**     | Issue media advisory through the state’s communications office.  
Call key state reporters who cover state government or health care to ensure that they receive the advisory and to encourage them to attend.  
Convene speakers for a dry run in which they deliver their talking points and take mock questions reporters are likely to ask. Speakers should be limited to 5–7 minutes each.  
Email stroke council members with the media advisory and ask them to share the final report with their constituencies when it is released. |
| **Day of Event**          | Arrive at least 90 minutes early to make sure the room is set up appropriately and all materials are ready.  
Have a press sign-in sheet to track which publications to check for coverage and for follow up with reporters.  
Issue press release on newswires at beginning of event.  
Write down all questions reporters ask to help you prepare for subsequent interviews and future press events.  
Obtain phone and cell phone numbers for all speakers in case a reporter inquires later in the day with a follow-up question. |
| **One Week After Event**  | Provide partners with a template newsletter article about the stroke report to publish in their communication vehicles.  
Compile a media report with photocopies of print coverage and listings of broadcast coverage. Share with key partners to reinforce their investment in the launch. |
| **One Month After Event** | Meet with state coalitions or stroke councils to evaluate report launch and reflect on lessons learned.  
Document any inquiries received from health care or EMS organizations about implementation of stroke centers or protocols. |
SAMPLE PRESS RELEASE FOR STROKE AWARENESS MONTH

Stroke Awareness Month is held each May. During this month, federal agencies and national stroke organizations conduct extensive media outreach, awareness events, and other activities to raise public awareness of stroke prevention and treatment.

Stroke Awareness Month is an opportunity for state heart disease and stroke prevention programs to work with the media and partners to raise awareness of the signs and symptoms of stroke and of the state’s efforts to improve secondary prevention of stroke.

Below is a template for a press release that staff can use to create a state-specific release to issue at the beginning of Stroke Awareness Month. As always, work with your health department’s public information office to draft and issue a press release within proper state protocols.
STROKE MONTH ACTIVITIES RAISE AWARENESS OF THE SIGNS AND SYMPTOMS OF STROKE AND INCREASE THE NUMBER OF PATIENTS GETTING TREATMENT

[INSERT CITY, INSERT STATE]—Though there are treatments available that can reverse disability from stroke, less than five percent of patients in [INSERT STATE NAME] and throughout the country receive them. Stroke is the third-leading cause of death and a leading cause of adult disability nationwide. And, in [INSERT STATE NAME], stroke affects more than [INSERT NUMBER] people who have strokes annually and [INSERT NUMBER] people who experience strokes and survive.

To help increase the number of stroke patients who receive treatment for stroke, [INSERT STATE NAME] is working with the Centers for Disease Control and Prevention (CDC) to raise public awareness of stroke signs and symptoms and to help improve health care for stroke patients.

May is national Stroke Awareness Month. During May and throughout the year, [INSERT STATE NAME] will work to raise awareness of the signs and symptoms of stroke and encourage people to call 9-1-1 immediately if they experience or witness anyone experiencing the following symptoms:

- Sudden numbness or weakness of face, arm, or leg—especially on one side of the body;
- Sudden confusion, trouble speaking, or difficulty understanding;
- Sudden trouble seeing in one or both eyes;
- Sudden trouble walking, dizziness, loss of balance or coordination; or
- Sudden severe headache with no known cause.

“Again and again we see in studies that patients do not recognize symptoms as stroke and fail to get to the hospital in time. This is a crisis of underutilization that causes unnecessary disability and costs millions extra in health care costs nationwide,” said Dr. George Mensah, Distinguished Scientist and Consultant in Heart Disease and Stroke Prevention, Division for Heart Disease and Stroke Prevention at CDC.

[INSERT SPECIFIC INFORMATION ON STATE ACTIVITIES]

During Stroke Awareness Month, [INSERT STATE NAME] encourages people at risk for stroke and their family members, friends, and caregivers to learn the signs of stroke. In many cases a person experiencing stroke does not realize it is occurring, but bystanders can recognize the symptoms and act quickly.

“The best thing to do when you see someone having a stroke is to call 9-1-1 immediately,” said [INSERT NAME, TITLE]. “Getting stroke victims to the hospital immediately can greatly increase their chance of having little or no disability,” [INSERT NAME] said.

Additionally, states are working with local communities to improve hospital and emergency medical services and increase quality of care for stroke patients. This process requires working with neurologists, radiologists, emergency physicians, nurses, emergency medical technicians, and others (such as primary care physicians and family practice physicians) to create and implement systems and protocols for evaluating and treating stroke patients.

“By improving the systems that affect stroke care, we can dramatically improve the outcomes for many patients,” said [INSERT NAME HERE]. “The key to stroke care is creating a chain of recovery that is focused on identifying and treating stroke patients at the earliest stage possible.”

For more information about the signs and symptoms of stroke, please visit [INSERT STATE WEBSITE HERE].

CDC protects people’s health and safety by preventing and controlling diseases and injuries; enhances health decisions by providing credible information on critical health issues; and promotes healthy living through strong partnerships with local, national, and international organizations. Since 1998, CDC has funded state programs to prevent heart disease and stroke. At present, 32 states and the District of Columbia receive such funds. For additional information see www.cdc.gov/cvh.

[INSERT STATE BOILER PLATE]

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SAMPLE OP-ED ARTICLE

Op-ed articles are brief opinion pieces usually published opposite the editorial page in newspapers. They allow readers to present a particular position or thought on timely or controversial topics in greater depth than possible with a letter to the editor.

The Tools and Resources chapter of the Communication Guide includes an op-ed piece about stroke focused on influencing policymakers. The sample op-ed below offers consumer education messages to help increase the number of patients who access stroke centers and systems. It focuses on a patient success story from Birmingham, Alabama and includes state-level data. The approach can be tailored to any state with stories of patients who recognized stroke symptoms and called 9-1-1, with state-level data from CDC’s Atlas of Stroke Mortality, or with data from a state’s Paul Coverdell National Acute Stroke Registry (if applicable).

YOU ARE THE FIRST LINK IN THE CHAIN OF RECOVERY

By [INSERT NAME]
[INSERT TITLE]
[INSERT STATE HEALTH DEPARTMENT NAME]

Joe Ray Dailey woke up one morning unable to speak. Recognizing quickly that something was wrong, Dailey’s wife immediately dialed 9-1-1 for an ambulance to get help as soon as possible. She did not know that Joe Ray was about to become a patient in one of the nation’s most sophisticated stroke systems.

Nineteen of Birmingham’s hospitals and emergency medical services have joined together to create a network of hospitals that offer stroke centers to quickly evaluate stroke patients, decide if they are candidates for treatments that can reverse the symptoms of stroke, and to provide around-the-clock care. The 9-1-1 call started a process that routed Joe Ray to Carraway Methodist Medical Center. Once he was there, doctors quickly scanned his brain, determined he had a blood clot, and administered treatments that dissolved the clot and reversed his symptoms.

Stroke is the third-leading cause of death and a leading cause of disability in the United States. More than 700,000 new strokes are reported each year, and Alabama ranks 27th in stroke deaths in the United States.

Fortunately, many of these strokes and much of the death and disability resulting from stroke can now be prevented. Over the past several years, scientists have developed new treatments that can reduce the number of stroke deaths and disabilities. The reality, though, is that few benefit from these new treatments because most have to be administered within the first few hours of stroke onset. In far too many cases, people do not recognize the signs and symptoms of stroke and arrive at the hospital too late to receive this treatment.

We are lucky to have access to a state-of-the-art stroke system and cutting-edge treatments for stroke. But, to ensure that our system can do its work, we all must learn the signs of stroke and, if we see them in ourselves or someone around us, make the decision to call 9-1-1.

These are the signs of stroke:
- sudden numbness or weakness of the face, arm, or leg (especially on one side of the body);
- sudden confusion, trouble speaking, or difficulty understanding speech;
- sudden trouble seeing in one or both eyes;
- sudden trouble walking, dizziness, or loss of balance or coordination;
- sudden, severe headache with no known cause.

Learn these signs, and our emergency medical technicians and hospitals can help more people with stroke walk out of the hospital. They are doing their jobs. Now it is time for all of us to do ours.