

Process Evaluation of the *Act-Belong-Commit* Mentally Healthy WA Campaign:
First 12 Months Data

Geoffrey Jalleh*
Robert J Donovan*^
Ray James*
Jennifer Ambridge*

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*Centre for Behavioural Research in Cancer Control,
Division of Health Sciences, Curtin University Bentley WA 6102

^Social Marketing Research Unit,
Curtin Business School, Curtin University, Bentley WA 6102

Corresponding author: Geoffrey Jalleh, Centre for Behavioural Research in Cancer
Control, Curtin University, Bentley, Western Australia 6102
g.jalleh@curtin.edu.au Tel: 61 8 9266 3789 Fax: 61 8 9266 1642

ABSTRACT

Objective: To assess the extent of partnerships established by and exposure obtained for the *Act-Belong-Commit* Campaign in the six intervention towns in the first 12 months from October 2005 to September 2006.

Methods: In each town, data were collated on media exposure, partnerships established and co-branding of community-based events and activities under the *Act-Belong-Commit* banner.

Results: In the first 12 months of the Campaign, four press advertisements were developed and placed twice a month for 12 months in a local newspaper in each town. The total coverage area was 45,350 cm², with a media buy of \$63,000. The campaign generated a total of 124 campaign-related press articles in these local newspapers (27,538 cm²), equating to approximately \$38,000 worth of paid media in terms of coverage area (cm²). In total, 59 key partnerships were established, holding 115 co-branded community events and activities. The Campaign attracted 21 sponsorships for partners, totalling approximately \$250,000, with a further \$40,000 for merchandise resources.

Conclusions:

The partnerships with community organisations facilitated the co-branding of events and activities which provided opportunities for individuals to *Act-Belong-Commit*. The Campaign officers were successful in forming ongoing partnerships in each of the towns, no doubt because the campaign offered these partners significant benefits for their co-operation. The Campaign officers were instrumental in securing sponsorships of community events and activities which provided substantial funding to the sponsored organisations and further

opportunities to promote the *Act-Belong-Commit* message. A substantial amount of unpaid media was generated mainly through good working relationships with the local media, again because the campaign offered them not only paid advertising but good stories and picture opportunities at local events.

Implications:

Establishing strong working relationships with partners, including the media, is dependent on being able to offer partners something of value to them in return. All health promotion efforts, but particularly those dealing with small community-based organisations or country town branches of larger organisations need to ensure that their efforts to engage partners is accompanied by an understanding of the partner organisations' needs.

Key words: mental health promotion, community-based intervention, population health, social marketing.

INTRODUCTION

Governments worldwide are concerned about the increasing incidence of mental health problems and disorders. Mental health problems may lead to behaviours which place people at higher risk of developing physical health diseases and conditions, including immune disorders, diabetes and cardiovascular disease.¹⁻⁴ The World Bank and the World Health Organisation estimate that mental health problems contribute to 10% of the global burden of disease, with depression predicted to be the largest health problem globally by the year 2020.⁵ In Australia, it is estimated that approximately one in five adults will experience a mental health problem in their lifetime.⁶ In Western Australia, depression was the leading cause of disability in 2000, and by 2016, it is predicted that mental health problems will be the leading cause of burden of disease for females and the second leading cause of burden of disease for males.⁷

Mental health problems have a negative impact on productivity at work, school and home. It is estimated that mental health problems account for one-third of days lost from work.^{8,9} Approximately five percent of Australians experience severe anxiety symptoms which hinders them from undertaking daily living tasks such as staying in employment and maintaining relationships.⁶

It is now widely acknowledged that the growth of mental health problems and disorders is straining the mental health services in meeting the demand for treatment services. This has led to growing international interest in promotion, prevention and early intervention for mental health to achieve significant reductions in the social and economic costs associated with mental health problems.¹⁰⁻¹³ There is increasing evidence that social isolation increases the

risk of depression and other mental disorders, and that activities and programs that assist people to remain active, strengthen social connections and become involved in community activities can have a positive influence on health status.^{1,14}

The *Act-Belong-Commit* Campaign

In October-November 2005, the *Act-Belong-Commit* Campaign was launched in six communities in regional Western Australia: one farming (Northam), two mining (Kalgoorlie and Karratha) and three coastal communities (Albany, Esperance and Geraldton). This two year community-based health promotion campaign is a pilot program aiming to improve the mental health of the whole community via the 'Act-Belong-Commit' ('A-B-C') message.

The 'A-B-C' message provides a simple mnemonic which represents three major domains of factors that both the literature and people in general consider contribute to good mental health.¹⁵⁻¹⁸ 'Act' refers to maintaining or increasing levels of: physical activity (e.g., walking, dancing); cognitive activity (e.g., reading, doing crossword puzzles); and social activity (e.g., saying hello to neighbours, maintaining contacts with friends). 'Belong' refers to: maintaining or increasing participation in groups if already a member or joining a group; maintaining or increasing participation in community and family activities and events. 'Commit' refers to taking up a cause (e.g., volunteering for 'Meals on Wheels' or joining an eco-environmental group) or challenge (e.g., learn a new or challenging skill). These three domains may be viewed as a hierarchy of increasing contribution to an individual's sense of self and mental health. An individual can 'act' by taking a walk or reading a book, 'belong' by joining a walking group or book club, and 'commit' by volunteering as secretary/organiser for the

group or club, or by engaging in orienteering walks or reading more intellectually challenging books.

The primary target groups in the intervention towns were: adults in general (18 years and over); organisations that directly provide or facilitate activities that could enhance people's mental health; and journalists for the local media. For individuals, the primary objectives were to inform and encourage them to engage in activities that would enhance their mental health. For community organisations, the primary objectives were to encourage them to form partnerships with the *Act-Belong-Commit* Campaign (and other community organisations) and promote their activities on the additional benefit that participation in their activities is beneficial to mental health. For journalists, the primary objectives were to establish working relationships to facilitate the use of press releases and coverage of local events held under the *Act-Belong-Commit* banner.

The primary objectives of the project officers for the first 12 months of the Campaign were to establish working partnerships with appropriate organisations and to try and achieve at least one co-branded event per month in each town. A social marketing approach was adopted in that potential partner organisations were not being asked to carry out any activities that they would not otherwise want to do, and were offered the *Act-Belong-Commit* project officers' organisational assistance, assistance in applying for funding from relevant funding bodies, and promotional opportunities for their organisation via their association with the *Act-Belong-Commit* campaign branding.¹⁹

For the first 12 months of the *Act-Belong-Commit* Campaign, the main promotional strategy consisted of paid advertising and unpaid publicity in local newspapers. A set of four launch

press advertisements was developed and placed in local newspapers. Later three more length ads dealing with specific issues were developed. The communication objectives of these advertisements were to increase people's knowledge and salience of factors conducive to good mental health, and to increase intentions to be more aware of what they can and should do to maintain their own mental health. They were designed to sensitise people to local organisations' promotion of their activities, and, in conjunction with these promotions, to get people to participate in specific events or become more active in organisations of which they were already members. The advertisement content was deliberately designed to avoid technical jargon and the notion that mental health concepts were complex. [All of the ads can be viewed on the website: www.actbelongcommit.org.au]. These advertisements were supplemented by publicity and press releases for events in the towns. All of the press ads included the website and a local telephone number. The ads were placed only in the towns' local newspaper to prevent contamination of non-intervention comparison sites.

A number of other promotional materials with the 'A-B-C' message (e.g., posters, frisbees, T-shirts, drink bottles, stickers, hats, bookmarks, fridge magnets and stress balls) were distributed in the towns (approximate cost: \$20,000). Radio interviews provided further opportunities to reach the community. Further details on the Campaign rationale and approach can be found in Donovan et al.²⁰

This paper presents the first 12 months data on media exposure and partnerships established.

METHOD

Media exposure was measured by the number and cm coverage of paid press advertisements and unpaid press articles. The monetary value of the unpaid media was estimated based on cm space. The number of radio interviews and talk-back spots was also monitored along with number of visits to the Campaign website.

Partnerships and collaborations were measured by the number of ongoing partnerships established with community organisations and the number and monetary value of sponsorships obtained.

RESULTS

Table 1 shows the amount of exposure to the *Act-Belong-Commit* Campaign in the first 12 months.

Media exposure

Newspaper: The four press advertisements were placed twice a month for 12 months in a local newspaper in each town. The total space of these advertisements was approximately 45,350 cm². The total media buy was \$63,000.

There were 124 press articles relating to the *Act-Belong-Commit* Campaign in the local newspapers (ranged between 9 and 44 articles in each town). The total space of these press articles was approximately 27,528 cm². Based on the cost of the paid media, the monetary value of this exposure in terms of coverage area (cm²) equates to approximately \$38,000.

Radio: The Campaign obtained a total of 46 radio interviews. In one town (Kalgoorlie), a radio station talk-back show hosted eight 6-minute spots to discuss and promote the Campaign events and activities.

Partnerships and collaborations with community organisations

In total, 59 key partnerships were established with community organisations across the six towns. These included government organisations (e.g., Department of Sport and Recreation, Divisions of General Practice, Disabilities Service Commission, Department of Environment and Conservation), non-government health organisations (e.g., St John's Ambulance, Men's Health Resource Centres), and non-profit organisations and volunteer groups (e.g., churches, Walking School Bus, Saving Animals from Euthanasia).

These organisations collaborated with the *Act-Belong-Commit* Campaign in running 115 co-branded events and activities. Some of these events are annual whereas others are more frequent and ad hoc. A major aim is that initiated events will be self-sustaining after the two year pilot ends. For example, in one town, partnerships have resulted in the formation of an Indigenous women's basketball team with additional support of local industry.

Assisting local organisations apply for funding from relevant grant bodies is part of this sustainability objective. A number of organisations were assisted in receiving funding including 21 Healthway sponsorships totalling approximately \$250,000. As part of these sponsorships, a further \$40,000 was provided in support sponsorship for merchandise resources to promote the 'A-B-C' message at the sponsored events and activities.

Awareness of the *Act-Belong-Commit* Campaign

A 12-month follow-up telephone survey has been conducted with approximately 1,200 intervention town residents and 1,000 metropolitan residents and non-intervention rural town residents. Preliminary analysis of the data found that overall awareness of the *Act-Belong-Commit* Campaign was 26% in the intervention towns (less than 2% in both the metro and rural controls).

DISCUSSION

The implementation of the *Act-Belong-Commit* Campaign varied in each town mainly due to differences in characteristics between towns. For example, Northam is a farming town with a much older population than the other towns, while Karratha is a fast growing mining town with a high proportion of males and a high turnover within the population. Differences were also due to staffing differences: in some towns the project officers had lived in the towns for many years, or had long experience in community health promotion, while others were staffed by relatively new graduates.

This *Act-Belong-Commit* Campaign highlights the importance of establishing strong partnerships and relationships with organisations and groups. Community organisations offering activities consistent with the 'A-B-C' message were encouraged to promote their activities under a mental health benefit message. In return, these partners were offered merchandise resources, paid advertising support, promotional expertise and expertise in applying for funding from grant bodies. A very positive outcome of the *Act-Belong-Commit*

Campaign was securing substantial Healthway funds to sponsor community events and activities and promote the 'A-B-C' message.

Strong working relationships were developed with media people in the towns which resulted in good use of Campaign press releases and coverage of local events held under the *Act-Belong-Commit* banner. The cm² coverage of this unpaid media equates to approximately 60% of the paid media. Other mutually beneficial newspaper features have been negotiated in some towns. For example, one town's newspaper features a 'club-of-the-month', describing the club's activities and contact details in the context of the *Act-Belong-Commit* logo and message. Another local newspaper instituted features on local individuals and how they 'lived' the 'A-B-C' message.

Given that the main promotional strategy was advertising and publicity only in local newspapers, the level of awareness of the *Act-Belong-Commit* Campaign among the population in the intervention towns was satisfactory.

CONCLUSION

In the first 12 months, the *Act-Belong-Commit* Campaign has successfully created partnerships with a wide range of community organisations to promote the activities they offer under the *Act-Belong-Commit* banner. The partnerships with community organisations facilitated the co-branding of events and activities which provided opportunities for individuals to *Act-Belong-Commit*. The Campaign officers were successful in forming ongoing partnerships in each of the towns, no doubt because the campaign offered these partners significant benefits for their co-operation. The Campaign officers were instrumental

in securing sponsorships for community events and activities which provided substantial funding to the sponsored organisations and further opportunities to promote the 'A-B-C' message. A substantial amount of unpaid media was generated mainly through good working relationships with the local media, again because the campaign offered them not only paid advertising but good stories and picture opportunities at local events.

Establishing strong working relationships with partners, including the media, is dependent on being able to offer partners something of value to them in return. All health promotion efforts, but particularly those dealing with small community-based organisations or country town branches of larger organisations need to ensure that their efforts to engage partners is accompanied by an understanding of the partner organisations' needs.

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Table 1: Amount of exposure to the Act-Belong-Commit Campaign in the first 12 months (October 2005 to September 2006).

	Albany N	Esperance N	Geraldton N	Kalgoorlie N	Karratha N	Northam N	TOTAL N
Media exposure:							
Press advertisements	40	16	13	9	11	33	122
Press articles (cm ²)	44 (8,220)	23 (6,718)	13 (3,065)	9 (2,712)	12 (3,024)	23 (3,790)	124 (27,528)
Radio interviews	17	2	11	6	9	1	46
Radio talk-back shows	0	0	0	8 (6min spots)	0	0	8 (6min spots)
Partnerships and collaborations:							
Major partnerships	12	11	11	11	6	8	59
Co-branded events	27	31	14	11	15	17	115

