Evaluation: Track camp medical reports; observation days, state epidemiology data by county out 6 months, 1 year, parent/counselor surveys post summer, if possible, beginning of camp next season

STRATEGIES

Targeting Early Adopters & Innovators with vested interest, exposure (Parents, Medical Community, Active Adults) to be role models/Influentials

Behavioral Model:

Awareness/Reinforcement at Point of Behavior, Repetition

Social Norming through training & "testing" Engineering & Enforcement where possible

PR Objectives

- Increase awareness and habit-forming behaviors by targeted O.L.s by 50% over 6 months (Parents, Counselors, Camp Administration)
- Increase knowledge of and action by parents & med professionals during spring/summer months by 25% among innovators and early adopters

PR Goal: In 1 year, increase by 5% the <u>reports</u> of Lyme tick bites in X County while helping reduce by 5% the incident of Lyme disease contraction (behavioral)

Tactics

Parents: Orientation, opt-out permissions, pickup/drop off reminders, bathroom & door decals, spray baskets with tick removal spoons, info flyers Counselors: training program, supply basket, supervision, form completion, tick collection Medical: formal training, reminders, exam room decals, use of targeted media

Parents of Children headed to camp

- Inundated with info, busy,
- Care about children,
- Smattering info sources (FB, Instagram, only some see local news
- Opinion leaders impt. e.g. docs., schools, friends

Camp Counselors

- Young, uninformed re issue, summer job only
- Typically a first job, so carefully supervised
- Care about children
- Info primarily from social media e.g.
 Instagram, TicTok, friends, family

Medical Profession (pediatricians)

- Busy, time constraints, lot of materials to cover with parents
- Rigorous requirements for reporting and counseling
- Eager to learn, care about patients
- Frequent readers of professional media and consumers of all media