A Social Marketing Plan for the Children's Safety Center

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A Social Marketing Plan for the Children’s Safety Center

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Arts in Journalism

by

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University of Arkansas
Bachelor of Arts in Journalism, 2016

August 2017
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This thesis project is approved for recommendation to the Graduate Council.

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Abstract

The Children’s Safety Center (CSC) is a nonprofit organization in Springdale, Arkansas, that advocates for child abuse victims in Northwest Arkansas. This thesis project includes a social marketing plan that aims to increase the overall awareness of the CSC and its new prevention programs used to decrease the number of child abuse victims in Northwest Arkansas. The social marketing plan also aims to create behavioral changes that increase participation in prevention programs and social media engagement, in addition to volunteers and donors. The plan was developed based on research on effective nonprofit social marketing plans, research on efficient communication efforts with individuals that participate, volunteer and donate to nonprofits, and through communication with the CSC’s Development Director Emily Fisher. The marketing plan provides recommendations on how to communicate with parents in the community, along with individuals that work with children. These individuals have the opportunity to participate in prevention programs, volunteer and donate to the CSC. The social marketing plan includes a public service announcement (PSA) that was evaluated using an online Qualtrics survey of CSC email recipients. The PSA and survey were created based on the Elaboration Likelihood Model (ELM) theory of persuasion. Survey responses were used to make recommendations and improvements to the original PSA, created to use on multiple media platforms. The social marketing plan will help increase prevention program participants, volunteers and donors to the CSC, with the overarching goal to decrease the number of child abuse victims in Northwest Arkansas.
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Introduction

The number of child abuse victims continues to rise both in Arkansas and the nation. There were 3.3 million child abuse reports in 2010 and every ten seconds a child is abused or raped in the United States (“Child abuse,” 2016). In 2015, 29 children died as a result of the abuse or neglect (“Arkansas’s children,” 2015). Children that are abused face physical, psychological, behavioral and societal consequences, from impaired brain development to cognitive difficulties. Children that are abused are also at an increased risk for juvenile delinquency and adult criminality (“Long-term consequences,” 2013). In 2013, there were 51,731 referrals for child abuse and neglect in Arkansas. More than 10,000 children (10,370) were victims of child abuse or neglect in 2013, which was a 7.4 percent decrease from 2012 but a 4.5 percent increase since 2009 in Arkansas.

Number of Child Abuse Victims Each Year Could Fill Small City

Above table: Compares the number of child abuse victims and referrals in Arkansas each year to the size of Fayetteville, Arkansas, the third largest city in the state (“Arkansas’s children,” 2015).
These children were neglected (64.2%), physically abused (18.7%) and 21.6 percent were sexually abused (“Arkansas’s children,” 2015). In 2016, more than 2,000 children were victims of maltreatment and more than half of the victim children were two-year-old females. These children were also 71 percent Caucasian and 15 percent African American (Hornby, 2016).

However, organizations like the Children’s Safety Center of Washington County have implemented ways to decrease the number of child abuse victims through child abuse prevention programs. The Children’s Safety Center (CSC) of Washington County is a non-profit organization that strives to facilitate effective prevention, detection, investigation and treatment of child abuse. The mission of the Children’s Safety Center of Washington County is to empower “children to overcome abuse and begin to trust, hope, and heal” (“Our story,” 2017, p. 1). The CSC works closely with law enforcement, child protective services, victim service providers, prosecutors, medical personnel, mental health professionals and community volunteers to better serve the interests of the child victims (“Our story,” 2017). The CSC served 545 children (89.05%) from Washington County last year, with a total of 612 alleged victims of child abuse served in 2016 (“2016 annual report,” 2017). The CSC serves any abuse victim under the age 18 and refers to them as “children.” “The primary goal of the CSC is to ensure children are not further victimized by the intervention systems designed to protect them” (“Children’s safety,” 2017, p. 1).

The CSC employs nine full-time staff members and a Sexual Assault Nurse Examiner nurse who is on-contract. These ten employees work to serve child victims in a variety of ways once they arrive at the facility. The CSC advocates for children and offers forensic interviews along with medical and therapy services for each child. Advocacy services include welcoming the child and family to the facility, managing the crisis during the first visit and enhancing cooperation of
the family. It also includes accompanying the child and non-offending family members through the court process, and providing other services, such as housing, food or clothing needs (“Our services,” 2017). In 2016, the CSC advocated for 612 children and families, 388 victims were aged between newborn to 12 years old and 224 victims were 13 to 17 years old. The average age served was 10 years old and the youngest victim was only two months old (“2016 annual report,” 2017).

The CSC also provides on-site forensic interviews for each child. These interviews reduce the overall number of conversations a child must have about the abuse, which creates less stress for the child and encourages openness and trust (“Our services,” 2017). Trained staff or trained law enforcement conduct the interviews and record interviews on DVDs when requested by law enforcement. Recordings also help reduce the number of interviews a child must have. The CSC conducted 544 forensic interviews in 2016 (“2016 annual report,” 2017).

Specialized on-site medical evaluations and sexual assault exams are also available for each child victim, which are conducted by a certified Sexual Assault Nurse Examiner (SANE) (“Our services,” 2017). “A certified SANE, specifically trained in child sexual assault exams, performs exams. Her work is peer reviewed by the Center’s Medical Director, Dr. Andrew Koehler of NWA Pediatric Clinic, and Dr. Karen Farst of Arkansas Children’s House in Little Rock” (“Our services,” 2017, p. 2). The SANE nurse provides physical abuse exams and sexually transmitted infection testing, along with pregnancy tests and case consultations. In 2016, 133 children received SANE examinations and almost 90 percent of the total children served in 2016 were sexual abuse victims (87% or 535 of 612) (“2016 annual report,” 2017).

The final service offered by the CSC involves mental health therapy, which is a “free, comprehensive treatment program for the child victims using trauma focused cognitive
behavioral therapy” (“Our services,” 2017, p. 2). Treatment goals of the CSC are to teach safety skills, reduce emotional impact of disclosure and promote healing and hope for the future (“Our services,” 2017). Types of therapy range from play and music therapy to family and group therapy. The CSC performed 784 therapy sessions and met with 91 new child clients in 2016 (“2016 annual report,” 2017).

In 2016, the annual operating budget for the CSC was $550,000 and the organization successfully raised $618,668.06, which is nearly $70,000 ($68,668.06) over budget. The organization met its budget through fundraisers ($172,168.28), state/federal grants and funds ($161,332.02), crime victims’ reparations ($125,423.20), individuals, businesses, organizations and churches ($105,571.56) along with foundation grants ($54,173). Due to the increase in the number of children abuse victims, the CSC recently hired two more child advocates, so they have four total child advocate staff members available to serve the children. The budget for 2017 is $580,000 and the CSC has already seen an increase in the number of children that have been served in 2017 compared to the numbers for 2016.

**Problem Definition**

**Communication Problems**

The number of alleged child abuse victims continues to grow in Washington County. CSC served 612 child abuse victims and 545 (89%) of those children were from Washington County in 2016. The remaining 55 children were from a different county and 12 children were from a different state. The CSC experienced a 12 percent increase in the number of children they served from 2015 (546 children) to 2016 (612 children) and saw an increase in children served from January 2016 to January 2017. With this continual rise of child abuse victims, the CSC needs to
focus on its prevention programs and social media platforms to continually gain prevention program participants, donors and volunteers for the organization.

The first communication problem includes the lack of promotion for the CSC’s new prevention programs. The CSC recently implemented two new prevention programs in the summer of 2016 to fight child abuse in Washington County. “Empower Me!” and “Stewards of Children” are prevention programs that raise awareness of the prevalence and consequences of child sexual abuse by educating children, parents and adults about the steps they can take to prevent, recognize and react responsibility to the threat of child sexual abuse.

The “Empower Me!” program trains school counselors with a body safety education curriculum. They implement the program with students in kindergarten through sixth grade, and the CSC then goes back to each school to train teachers and other staff on responding and reporting abuse appropriately. According to Development Director Emily Fisher, the CSC program director introduced the “Empower Me!” curriculum to about 100 schools and staff in Washington County School Districts in 2016, because children will likely disclose or report abuse to a teacher or other school staff.

The “Stewards of Children” program is a two-hour, evidence-based training that teaches adults five steps to protect children from sexual abuse. The training applies to any adult who comes in contact with children. This includes adults that interact with children through their job, church or as a parent or relative. Between August and November 2016, the CSC trained 45 community members. In 2017, the CSC plans to have open enrollment trainings quarterly for any interested community members and has several trainings with other agencies scheduled. The Program Director can also go to any agency or anywhere in the community to conduct this
presentation. These programs are key to fighting child abuse in the community, but there is a lack of social media posts regarding these new programs.

In order to continually target individuals to participate in prevention programs, the CSC needs to organize social media consistently across all platforms. The Development Director Emily Fisher manages the CSC social media across all platforms with the help from an intern. While the Facebook platform is managed well, there is room to improve the Twitter and Instagram accounts.

Experts recommend about three posts on Facebook per week (“How often,” 2015), especially on Saturday and Sunday mornings (“10 Facebook,” 2015), so the CSC posts just above the recommended amount per week. From May 2016 to April 2017, the CSC posted a total of 288 times on Facebook (average of 24 posts per month). The CSC has 3,458 likes on Facebook and posted 19 times in November and 25 times for the month of December. For both months, approximately 50 percent of posts consisted of thanking donors or posting about donations to the organization, (52.6% in November, 48% in December). The other posts consisted of events, child abuse prevention, blog posts, newsletters, holiday posts or photo changes. However, only one post was made to Facebook regarding child abuse prevention for both months. In addition, the top posts for the month of November consisted of 16 likes about a donation post and for December consisted of 37 likes for a shared post about the CSC’s newsletter (“Children’s safety,” 2016). The Facebook handle for CSC is “@childrenssafetycenter” (“@childrenssafetycenter,” 2017). According to Emily Fisher, social media posts focus on certain hashtags throughout the week, including #MissionMonday, #WisdomWednesday, #FaceTheFactsFriday and #SpotlightSunday from the CSC blog. However, there is no day or hashtag dedicated throughout the week for the prevention programs offered by the CSC.
The second communication problem includes the lack of consistency on Twitter and Instagram. The CSC fails to engage its audience with consistent posts on Twitter and Instagram, which are great avenues to target prevention program participants along with donors and volunteers. For the month of November, the CSC tweeted a total of 33 times, with only 19 organic tweets, and the top post received only two retweets and two likes. The 14 other tweets were direct links to Facebook posts, meaning the entire post could not be viewed unless the Facebook linked was clicked. With this, every post on Twitter contained a link to the CSC’s Facebook page, instead of organically tweeting, which would allow for the full post to be viewed on Twitter.

In December, the organization posted on Twitter a total of 125 times, which averages to about 4.5 times a day for that month. However, there were only 13 organic posts for December. The other 112 posts were links to the Facebook page and 92 of those posts (82%) took place on December 5 and read “I posted a new photo to Facebook.” The top post for December only received one retweet and two likes. The CSC also posted 17 total tweets in January with five organic tweets and 12 tweets linking directly to Facebook. The Twitter account has 609 followers, which is about 82 percent less than the Facebook account. In addition, the Twitter handle (@CSCNWA) is different from the Facebook account, which has potential to cause confusion among followers for the two different platforms ("@CSCNWA," 2017).

The CSC also has an Instagram account that has 499 followers and the same handle (@CSCNWA) as the Twitter account. In November, there were 21 total posts to the account, with two reposts from other accounts, but six of the posts for the entire month (almost 30%) occurred on November 29. The top post for this month received 40 likes. In December, there were 16 total posts that consisted of two reposts, while the top post received 33 likes.
The third communication problem involves the inconsistent names of each social media platform (title and social media handle). The CSC does not have a consistent name across its three social media platforms, which makes it difficult for users to find the organization for interaction purposes, such as tagging in photos or mentioning in posts. This is important because individuals are known based on their social media handles. For example, the Facebook page, “Children’s Safety Center” with the handle “@childrenssafetycenter,” is different from the Twitter page, “Child Safety Center” with the handle “@CSCNWA” and the Instagram name “Children’s Safety Center” and handle “@CSCNWA.” There are also 12 photos publicly published on Instagram with the hashtag “#childrenssafetycenter,” but only one of these photos (8%) tags the organization on Instagram. In addition, there are 14 public posts using the hashtag “#CSCNWA” (“@csenwa,” 2017). This could be potentially harming the CSC and keeping the organization from reaching a larger audience, due to its inconsistent social media names, handles and hashtags across all three platforms.

**Target Market**

In order to prevent child abuse in Washington County, the first primary target market should focus on individuals with children. Based on 2015 Washington County data, the median resident age was 31 with 110,345 males and 110,447 females. In addition, 74.1 percent are Caucasian and 15.5 percent are Hispanic/Latino (see Appendix C) (“Washington county,” 2017). In addition, the majority of the children served by the CSC in Washington County were also Caucasian/White (70% or 429 children) or Hispanic/Latino (17% or 105 children) (“2016 annual report,” 2017).

There are 195,502 households in the county (34,356 male householders, 13,703 female householders) that include 56,422 children (51,465 natural, 1,665 adopted and 3,292
stepchildren) and only 27,842 of these are married couples with children. There are also 7,967 single-parent households that consist of 1,971 men (see Appendix A) and 5,996 women (see Appendix B) (“Washington county,” 2017). The average household consists of two people, while the median household income was $46,160 (“Washington county,” 2017). Although there are more married households compared to the number of single parents, women are waiting longer to have children. The average age of new mothers is 26 years old, while Caucasian women are waiting until they are at least 27 years old or older (see Appendix D) (Bichell, 2016).

The first primary target market for the CSC social marketing plan includes married couple households along with male and female single parent households with children that are newborn to 17 years old. Target Caucasian and Hispanic adults in Washington County aged 25 to 55 with household incomes (HHI) between $30,000 and $80,000 where two or more people live in the household. Specifically target these individuals for the “Stewards of Children” prevention program outreach because parents are more likely to seek parenting help and information on parenting instead of admitting to child abuse (Saunders & Goddard, 2002, p. 18).

The second primary target market for the social marketing plan includes Caucasian and Hispanic individuals age 35 to 54 with HHI between $30,000 and $95,000 with bachelor’s degrees that work with children, including teachers, counselors, coaches, doctors, day care workers and other childcare professionals. Target these individuals specifically for the “Empower Me!” prevention program and also for volunteering, donating and fundraising for the CSC because these households are most likely to volunteer or donate to the CSC (“Volunteering,” 2015).
Target Market Characteristics

A study by the Bureau of Labor Statistics indicates the national demographics for potential volunteers are white adults (26.4%) age 35 to 54 years old (56.9%), with at least a bachelor’s degree (38.8%). These individuals are more likely to volunteer and 26.3 percent volunteered with a youth service organization in 2015. Parents with young children are also more likely to volunteer (31.3%) versus those with no children (22.6%) and with less education or some college (19.9%). Parents also engage in more activities that involve children such as teaching, tutoring or mentoring youth (“Volunteering,” 2015). “Volunteering primarily for educational or youth service organizations increased with educational attainment” (“Volunteering,” 2015, p. 2).

However, part-time employees (31.1%) were more likely to volunteer than full time employees (26.3%) (“Volunteering,” 2015). Seventy-two percent of charitable giving to nonprofits in the U.S. is from individuals. The CSC should target donors with incomes below $100,000, because these individuals are more likely to donate than those with incomes between $100,000 and $200,000 (“Charitable giving,” 2014). These individuals are also 1.6 times more likely to donate if they are married and 1.5 times more likely if they have a bachelor’s degree (“Statistics,” 2016).

These individuals also use social media. “Facebook remains the most popular social media site – 72 percent of online adults are Facebook users, amounting to 62 percent of all American adults” (Duggan, 2015, p. 2). Individuals earning $75,000 or more comprise 78 percent of Facebook’s demographic, and 70 percent use the social media outlet daily (Duggan, 2015). Twitter is also popular among college graduates (30%) age 30 to 49 (25%) with annual household incomes of $50,000 or more (27%). Twenty-three percent of adult Internet users use Twitter and the platform is popular among younger adults that include Hispanic (25%) and
Caucasian (21%) individuals (Duggan, Ellison, Lampe, Lenhart & Madden, 2015). Twenty-six percent of Internet users also use Instagram. Women (29%) and Hispanic individuals (34%) that are college graduates (24%) age 18 to 29 (53%) and 30 to 49 (25%) living in urban areas (28%) tend to use the platform (Duggan et al., 2015).

**Strategies for Child Abuse Prevention**

According to Child Welfare Information Gateway (2013), there are several strategies to prevent child abuse and neglect. These strategies are most effective when parents are involved in all aspects of the program planning, implementation and evaluation, and are more likely to make long-term changes to parenting behaviors. In addition to skills-based curriculum taught to children that involve safety and protection skills, parent education programs help decrease abusive behaviors and develop healthy parenting.

Parent-focused programs also help prevent child abuse to help the parents develop positive parenting skills. These include home visit programs, parent mentor or leadership programs, parent support groups, family resource centers and respite and crisis care programs, which offer temporary relief to parents during stressful situations (“Preventing child,” 2013). Prevention programs have also focused on reducing risk factors for families that may be at risk of abuse or neglect. “Prevention services are also recognizing the importance of promoting protective factors, circumstances in families and communities that increase the health and well-being of children and families” (“Preventing child,” 2013, p. 4). Six protective factors, such as nurturing and attachment, knowledge of parenting and of child and youth development, parental resilience, social connections, concrete support for parents and social and emotional competence all help lower the likelihood of child abuse and neglect incidents. Factors range from problem solving
abilities to creating an environment where the parent and child relationship can flourish, but all turn back to empowering and educating the parent (“Long-term consequences,” 2013).

Prevention programs used to fight child abuse and neglect also benefit from public awareness campaigns, such as using public service announcements (PSAs) to promote healthy parenting and child safety (“Preventing child,” 2013). In a recent study by the Centers for Disease Control and Prevention (2009), state public health agencies (SPHAs) involved in child maltreatment prevention efforts found aspects of social marketing important to child maltreatment prevention, healthy child development promotion and developing family resiliency. For example, SPHAs indicated that these techniques were “useful or very useful” for communicating health messages: PSAs (39 SPHAs or 76%); press releases (61%); newspaper articles (27 SPHAs or 53%); fact sheets (26 or 51%); and sample newsletter articles (24 or 47 %) (“Findings from,” 2010).

Several successful social marketing plans were utilized to prevent child abuse. New Zealand’s “Breaking the Cycle” child abuse and prevention campaign in 1995 applied a social marketing plan to change abusive parenting behaviors and to increase awareness and self-reported behavior in the general population (Saunders & Goddard, 2002). The government funded campaign ran from 1995 to 2000, aiming to influence parental awareness, knowledge and behavior using a broad strategy that focused on paid television advertising, in addition to radio, print media, phone lines and other resources. The messages were hard-hitting and primarily targeted families that were abusing their children, and the secondary target audience included all adults (“Are social,” 2010). It informed parents that a “change in your behavior can change the behavior of your child and make your lives more enjoyable” (“Are social,” 2010, p. 4).

In addition, the Department of Children and Families and the New Jersey Task Force on Child Abuse and Neglect (2010) targeted the general population in their primary prevention
efforts with PSAs that focused on parent education programs, along with public awareness campaigns that provided information on how and where to report suspected child abuse and neglect (“A roadmap,” 2010). The campaign evaluated the results through formative assessments, pilot testing and impact evaluations. There was a 79 percent of awareness of the “Backwards/Forwards” commercial that aired for five weeks and 91 percent increase in awareness for the “Vicious Cycle” television commercial (Young et al., 1999). The surveyed population included youth 15 years and older that were aware of radio ads and message recall after the campaign. “Around two-fifths (39%) of the 15 plus population were aware of the stage three radio advertising and it had strong message recall” (Young et al., 1999, p. 3). The campaign created awareness of the two television ads among 56 and 47 percent of respondents, and 48 percent were aware of the parenting radio ads. The campaign was also goal-oriented in child protection through cognitive, action, behavioral and value change (Saunders & Goddard, 2002, p. 15). “In relation to topic awareness there was an overall 8 percent increase in unprompted awareness of emotional abuse as a social problem between the pre- and post-campaign surveys for ‘Breaking the Cycle’ campaign, in addition to the campaign itself” (Horsfall et al., 2010, p. 19).

This campaign was successful because there was an 8 percent increase in general awareness of abusive behaviors towards children, with a 12 percent increase in awareness of behaviors such as yelling, shouting and screaming at a child and a 7 percent increase in “putting a child down” following the campaign. There was a 22 percent increase in the target ethnic group (Maori) and a 30 percent increase in the other ethnic groups (Young et al., 1999). The campaign also found that “people are much more likely to identify themselves as having difficulties with parenting than as child abusers, and they are more likely to seek information or help with their parenting skills”
It also focused on a social marketing model that was built around the belief that all strategies begin with the client or target market. In addition, the campaign was centered on the idea that the audiences’ beliefs and values were key to understanding their interests, thus, shaping the campaign to fit into the audiences’ interests. “For Pacific Islands people particularly there were significant increases in their recognition of fighting and arguing in front of a child (increased 45%) as abuse and verbally putting down a child (increased 20%)” (Young et al., 1999, p. 3).

Other social marketing campaigns related to child maltreatment that were successful in raising awareness include Australia’s “It’s Not OK to Shake Babies” (1995), “It’s Got to Stop” (1997), “NAPCAN child abuse prevention media campaigns” (2000), “Accentuate the Positive” (1998), and “Be Cool, Not Cruel” (2000) (Horsfall et al., 2010). Campaigns in the United States include the “Alcohol Abuse, Drug Abuse, Child Abuse, One Thing Leads to Another” (1995) and the “Triple-P Parenting Population Trial” (2007) (Horsfall et al., 2010). Other successful campaigns included the “Domestic Abuse – There’s No Excuse: Wave 11 Domestic Abuse Effects Children” in Scotland during 2008 (Horsfall et al., 2010). Several of these campaigns had high levels of awareness at the end of the campaigns. “Accentuate the Positive” had 69 percent awareness of its television advertisements, “Be Cool, Not Cruel” recorded 60 percent of participants that heard of the key character from the campaign and 22.5 percent could name the character without prompting. The “It’s Not OK” campaign had 95 percent of participants that were able to recall something from the advertisements, while the “Domestic Abuse – There’s No Excuse” made 72 percent aware of the campaign’s advertising and publicity on domestic abuse (Horsfall et al., 2010). “Keys Young (2000) noted that campaign slogans had a higher rate of recall than media announcements” (Horsfall et al., 2010, p. 19)
Donovan (1992) found that child abuse campaigns should place the issue on the community’s agenda through framing the issue of abuse and prompting individuals to report abuse. Individuals should be directed to other sources for assistance, ultimately striving to change social norms by modeling appropriate and inappropriate behaviors. With effective modeling, awareness of one’s behavior and self-responsibility to report abusive behaviors will increase (Saunders & Goddard, 2002).

**Creative Strategy**

**Cognitive Objectives**

In a social marketing plan, cognitive objectives refer to what the target market should learn from campaign messages (Fazio & Olson, 2003). Cognitive objectives represent what the target market will learn or think about the PSA or social media communications, such as becoming aware that the CSC exists or learning about its new child abuse prevention programs.

The two cognitive objectives for the CSC’s social marketing plan include:

To increase awareness of the CSC by 10 percent in all target markets from August 2017 to August 2018, including Caucasian and Hispanic parents age 25 to 55 years old, and child care workers aged 35 to 55 years old.

To increase awareness of the CSC’s new prevention programs by 5 percent in all target markets, including Caucasian and Hispanic parents age 25 to 55 years old, and child care workers aged 35 to 55 years old.

These cognitive objectives are appropriate for the CSC because Northwest Arkansas residents need to be made aware of child abuse, along with the CSC and its child abuse prevention programs and where to access the appropriate resources if necessary, in order to prevent child abuse locally.
**Conative Objectives**

It is important for the target market to make behavioral changes after exposure to the social marketing plan. Conative objectives refer to the behavioral actions of individuals (Fazio & Olson, 2003). Regarding the CSC, conative objectives include action to benefit the community and the CSC.

The three conative objectives for the CSC’s social marketing plan include:

To increase CSC prevention program participation by 10 percent among adults ages 25 to 55 with annual household incomes below $100,000 from August 2017 to August 2018.

To increase CSC volunteers and donors by 25 percent among Caucasian parents age 35 to 54 that have a bachelor’s degree with household incomes between $45,000 and $95,000 from August 2017 to August 2018.

To increase CSC engagement with social media prevention posts on Facebook (20%), Twitter (35%) and Instagram (20%) among social media users ages 35 to 54 with annual household incomes below $100,000 from August 2017 to August 2018.

**Positioning Statement and Slogan**

The overall goal of the two new prevention programs is to decrease the number of child abuse cases in Northwest Arkansas by educating families and individuals who work with children in the community. Ultimately, parents and community members have to be involved in the prevention process, which is why the PSA focuses on awareness, instruction and persuasion. “To generate awareness, campaign messages must inform publics about the health topic…tell publics what to do and how to do it, and…give reasons why publics should adopt this particular health behavior” (Georgiadis, 2013, p. 62). The headline for the PSA is “Fight child abuse in Northwest Arkansas.” The headline is presented in a direct manner to immediately bring
attention and awareness of the child abuse problem in the community. The subheadline includes a call to action to meet the behavioral goals: “Join the Children’s Safety Center’s new prevention programs to fight child abuse.” The subhead also provides immediate instruction on how to get involved to help fight child abuse. The slogan, “Provide. Prevent. Protect,” which encompasses all forms of support one can give the CSC, is bold on the PSA and placed next to a photo of a child wearing a superhero costume. The slogan takes on an empowering tone that does not “guilt” the target market into donating, persuading readers to protect children by providing for the CSC, ultimately preventing child abuse. “Provide” refers to all time, monetary and item donations. “Prevent” refers to the prevention programs offered by the CSC, but also places responsibility on the target market to prevent child abuse locally. Finally, “Protect” refers to the overall goal of protecting children from child abuse. This slogan highlights the benefits of prevention program involvement while protecting children’s privacy.

The body copy identifies the actual prevention programs “Stewards of Children” and “Empower Me!” that is followed by smaller copy summarizing each program. The body copy under “Stewards of Children” “educates school counselors, teachers and parents on body safety education curriculum,” while the “Empower Me!” copy “teaches parents 5 steps to protect their children from sexual abuse.” The bottom of the PSA includes information to educate the targets about the CSC’s mission and the Arkansas Child Abuse Hotline: “The Children’s Safety Center of Washington County empowers children to overcome abuse and begin to trust, hope and heal. Please help. If you suspect child abuse, call the Arkansas Child Abuse Hotline at 1-800-482-5964. Or contact us to find out other ways you can help.” The CSC’s contact information, logo and social media logos are placed at the bottom as well.
Theoretical Analysis

The elaboration likelihood model (ELM) is a theory that examines the general motivation of individuals to think about a message. Individuals can think about a message regardless of whether one’s motivation to process a message is high or low, but other factors, such as personal relevance, play an important role in processing. “The ELM holds that as the likelihood of elaboration is increased (as determined by factors such as the personal relevance of the message and the number of times it is repeated), the perceived quality of the issue-relevant information presented becomes a more important determinant of persuasion” (Petty et al., 2009, p.136).

The processes and consequences of persuasion differ in each situation for each individual based on past experiences and preexisting opinions. This theory seeks to explain the level of elaboration, or effort, brought to evaluating messages. Major concepts include the routes to persuasion, such as the central and peripheral routes, along with yielding and other variables that affect the amount of thinking. These include personal relevance, attitude and objective versus biased thinking.

The central route involves individuals that process information in a more in-depth manner. This means individuals look beyond cues used to attract attention and read into the content of messages and study them (Bryant & Davis, 2009, p. 132). Peripheral route processing occurs when the relevance of the message and motivation or ability to process the message is low. Individuals focus on cues, such as cute photos or bold font, used to attract attention and encourage processing (Bryant & Oliver, 2009).

The central elements in this PSA (see Appendix G) include the headline, “Fight child abuse in Northwest Arkansas,” the subhead, “Join the Children’s Safety Center’s new prevention programs to fight child abuse,” along with the body copy that lists the prevention programs,
includes program descriptions and the CSC’s mission and how to report child abuse. These cues are processed centrally because this information supports and explains the call to action to engage in the prevention programs and individuals that process centrally evaluate all of the information that is provided in a message.

The peripheral elements in the PSA involve the image of the child and the slogan, “Provide. Prevent. Protect.” These cues are available for individuals that have little motivation or lack the ability to process the central information. Alliteration and bright colors are used to grab the attention of those with low motivation to process.

Rucker and Petty (2006) developed a six step method to determine the effectiveness of a PSA using the ELM: Step 1, consider audience elaboration level; Step 2, evaluate message characteristics; Step 3, reviewing the message objective or type of change desired; Step 4, evaluating the congruency between steps one through three; Step 5, testing message effectiveness; and Step 6, evaluating the message effectiveness (Rucker & Petty, 2006).

(1) **Consider the audience elaboration level.** The first step examines if the audience will process the PSA using the central route, peripheral route or both. In this step it is important to review whether or not the audience is naturally prone to scrutinize the message carefully and if they are able to do so (Rucker & Petty, 2006). The audience must have the motivation and the ability to process the message centrally, however, if one area of processing is lacking, the information will be processed peripherally (Rucker & Petty, 2006).

The target market is high in motivation because they are local residents and the CSC is located in Washington County, the area where child abuse is growing and the CSC child abuse prevention programs are offered. The subject is relevant because the primary and secondary target markets either have children or work with children. The PSA features an image of a child
in a superhero costume, along with a headline, slogan, and body copy that feature the benefits to the local community. These elements target a college-educated segment, which is able and motivated to centrally process the PSA.

(2) Evaluating message characteristics. The PSA was designed to induce both the central and peripheral routes of persuasion. While the target market has the ability to process the message, the motivation behind centrally processing the PSA cannot be guaranteed. For example, if an individual suffered from child abuse, the PSA may elicit negative emotions resulting in a negative attitude about prevention or even providing for the CSC. Such an individual may have negative emotions due to their experiences, but recognize that the CSC helps children in similar situations, thus eliciting a moderate or neutral response. According to Rucker and Petty (2006), this combination of emotions will result in a neutral response towards the PSA. Although these examples may be rare instances, the PSA message characteristics were developed with sensitivity of the topic at hand.

The PSA encourages central processing by educating highly motivated individuals that joining the prevention programs will have long-term impacts on fighting child abuse. Thus, encouraging enduring change in this audience to participate in the new programs.

The elements in the PSA that encourage peripheral processing include a bright colored photo of a child in a superhero costume. This simple image of child elicits the idea of a child with strength, while the bright colors attract attention and add to the “fun” feeling of the image. The slogan “Provide. Prevent. Protect” is written in a bold, Chalkduster font, to attract attention and add to the fun, childlike feel of the PSA. The prevention programs names are rendered in a bright color similar to the CSC’s logo. These elements are intended to encourage peripheral processing. For example, one may see a picture of a child in a bright costume, the slogan in bold
text differentiated from the rest of the body copy, along with the names of the prevention programs and the CSC’s logo. Overall, if the PSA is processed peripherally, the reader can easily recognize a child, the CSC and its resources for child abuse prevention.

(3) Reviewing the message objective or type of change desired. The primary purpose of the PSA is to produce enduring attitude change because attitudes formed through the central route tend to persist over time, are resistant to change and can influence other judgments and behaviors (Rucker & Petty, 2006). However, if the target market’s motivation to process the PSA is low, it will be processed peripherally eliciting short-term or immediate change. Individuals may not change their parenting techniques, but they may attend one class for a prevention program. In addition, peripheral processors are made aware of the child abuse problem in Northwest Arkansas and that the CSC and its resources exist.

(4) Evaluate audience elaboration, message characteristics, and message objectives. The fourth step of the ELM model seeks congruency between the audience elaboration level, message characteristics and objectives (Rucker & Petty, 2006). To compare congruency levels, an online survey was developed using the University of Arkansas’ Qualtrics software and sent to the CSC email list. The survey included open-ended and close-ended questions that allowed the recipients to give their opinions on the content and design of the PSA, along with whether or not the PSA encouraged them to participate or donate to the CSC. After the survey results were analyzed, the PSA was revised to address the feedback from the subjects (see Recommendations, page 31).

(5) Test message effectiveness. The PSA’s effectiveness was also tested using open-ended questions in the email survey. For example, subjects were asked in two open-ended questions for their favorite and least favorite parts of the PSA, allowing subjects to discuss their
attitude toward the PSA, perhaps revealing their level of scrutiny and processing. For example, it is assumed that subjects who discussed the bright, colored photo of the child instead of the content about the new prevention programs processed peripherally with a low level of scrutiny.

(6) Evaluate message effectiveness. Rucker and Petty (2006) suggest asking three questions to determine whether the message had the intended effects: “Did people attend to and process the strong arguments? Did people rely on cues? Were the resulting attitudes held with certainty?” (Rucker & Petty, 2006, p. 45). In order to help determine the message effectiveness, the survey addressed questions that focused on the PSA’s influence on consumers’ attitudes towards the CSC, including, “What did you perceive the primary message of the PSA to be?” (see Table 6), “What was your perception of the slogan, ‘Provide. Prevent. Protect.’?” (see Table 7) and “Why did you perceive the slogan this way?” (see Table 8). Participants were also asked to rate the PSA on a scale from (1) strongly disagree to (5) strongly agree for the following statements: “PSA makes it seem like child abuse prevention contributes to society” (see Table 9a), “PSA is for people like me” (see Table 9b), “Image of child is pleasing” (see Table 10a), “Statement about prevention programs is NOT pleasing” (see Table 10b), “Statement about fighting child abuse is NOT pleasing” (see Table 10c) and the “PSA was NOT pleasing” (see Table 10d). Each of these cues was further tested to see if they made participants more likely to join prevention programs (see Table 11a to 11d) and donate to the CSC (see Table 12a to 12d). Participants were also asked for their favorite (see Table 13) and least favorite part of the PSA (see Table 14).

Survey to Test Effectiveness

A Qualtrics online survey was created to examine awareness and identify the target market’s motivations for participating in prevention programs, donating and aiding child abuse
prevention. Online surveys represent an easy, affordable way to collect data, identify issues in target market behavior and build upon past survey questions and data (Wimmer & Dominick, 2011). An online survey questionnaire was used because the delivery and retrieval of data require the least amount of time from recipients (“Using surveys,” 2006). The survey was distributed to the CSC email list starting on March 23, 2017, following IRB approval (see Appendix K).

The CSC’s Development Director emailed the survey to 1,948 email recipients in order to keep the recipients anonymous. The recipients included volunteers, donors, board members, staff and all others registering to receive email from the CSC, while staff and board members were encouraged by the development director to participate in the survey. The email did not ask respondents to identify themselves, because participants are more likely to complete surveys if they believe they cannot be identified from their responses (“Using surveys,” 2006).

This convenience sample represents a type of nonprobability sampling from population members that are an easy or “convenient” source used to gather data. In addition, expert judgment was not used to choose the sample of elements, which is needed in purposive sampling (Lavrakas, 2008). Convenience sampling offers several advantages, including timeliness of data collection, the price to administer sampling is cheap and it is helpful for hypothesis generation and pilot studies. It is also simple and easy to use in sampling and research. However, the disadvantages include high levels of sampling error and vulnerability to selection bias and influences. In addition, some studies that used convenience sampling have little credibility (“Convenience sampling,” 2016).

The email sent to participants explained the purpose of the online survey as well as an opt-in or opt-out link allowing the subjects to consent to participate or decline the survey (see
Appendix E). The first email reminder was sent on April 5, 2017, or about six to eight business days after the original emailed survey, as recommended ("Survey reminders," 2010). Weekly reminders were sent April 12 and April 26, as reminders should be sent weekly to increase survey responses (Schirmer, 2009). The survey closed April 28, 2017.

The online survey was designed so participants could complete it in 20 minutes or less because longer surveys have higher response rates than shorter surveys (Sheehan, 2001), and 20 minutes is the maximum length for online Internet surveys (Wimmer & Dominick, 2011). Survey response rates are not necessarily based on the survey length, but the prominence of the topic and contacts can influence response rates (Sheehan, 2001). Questions were constructed based on Wimmer and Dominick’s (2011) recommendations including: (1) recognizing the goals of the project so the questions included are appropriate; (2) questions that are clear and easy to understand; (3) questions must correctly communicate what is required from the respondents; (4) it cannot be assumed that participants understand the questions; and (5) follow Ockham’s Razor (or simplicity is preferred) in question development and order (Wimmer & Dominick, 2011).

To fully understand survey participants’ involvement with children, individuals were asked to describe their unpaid, volunteer experience (see Table 1) and their paid, work experience with children (see Table 2). Individuals that work or volunteer with children may have preexisting knowledge on child abuse. This knowledge would allow for insight on the PSA that would not be available from the general public. To measure preexisting knowledge on child abuse and prevention techniques, individuals were asked to select the effective ways to fight child abuse (see Table 5).

Individuals were also asked to identify their donation experience with children advocacy centers to gauge whether or not they were current donors to the CSC (see Table 3). To test brand
name and aided awareness, participants were asked to identify the first organization that came to mind when thinking of helping child abuse victims (see Table 4). Aided awareness involves individuals recognizing an organization’s name after exposure, and brand name awareness is the overall awareness of an organization’s brand (Vinjamuri, 2004).

The survey introduced the PSA and tested for five cues to determine if the PSA was processed peripherally or centrally, suggesting whether long- or short-term change has occurred in the target market (Rucker & Petty, 2006). The four cues that were tested included (1) the slogan, “Provide. Prevent. Protect,” (2) the image of child in a superhero costume, (3) the headline about fighting child abuse in Northwest Arkansas, and (4) the subhead about new prevention programs provided by the CSC. To measure if the PSA was processed peripherally or centrally, participants explained in an open-ended question what they perceived as the primary message of the PSA (see Table 6).

The first cue tested the slogan, “Provide. Prevent. Protect.” The slogan was created to highlight prevention programs with a memorable phrase, while also including providing for children and the CSC to ultimately protect children. Slogans should be designed as “memorable, short, and snappy” (Patterson & Radtke, 2009, p. 88). The slogan used alliteration to highlight the three P’s and attract the target market if they processed peripherally. Alliteration is a safe alternative to metaphors or puns, and does not create doubt or confusion (Djafarova & Andersen, 2008). “Provide” alluded to monetary donations or volunteering with the CSC. “Prevent” encouraged participants to prevent child abuse through the CSC’s new prevention programs. “Protect” enforced the overall goal of the CSC, to “protect” children from child abuse.

Participants were asked to rate the slogan, “Provide. Prevent. Protect.” on a five-point Likert-scale indicating if they perceived the slogan as (1) negative or (5) positive (see Table 7).
Individuals gave their perceived opinions on the slogan in an open-ended question (see Table 8), which helps determine if the PSA was processed through the central or peripheral route (Rucker & Petty, 2009).

The second cue tested the photo of the child dressed as a superhero. This image was chosen as it represents a Caucasian child and the primary target market is Caucasian. The CSC also primarily serves Caucasian child abuse victims. In addition, the gender of the child is not easily identified, so the issue of abuse is not generalized to male or female children. The child is dressed in a superhero costume, which contrasts from other campaigns that include images of children hurting, abused or sad in black and white photos. The image elicits positive emotions that would not scare children and could lead to conversations between parents and their children. The image provides a language of power and resilience, thus empowering children that may see this PSA. This image urges the target market to encourage children to stand up for themselves against child abuse, through open discussions between adults and children that support them in recognizing oppression and power about child abuse (James & Prout, 2005). “It is only by discussing power with children that we can explain why some children ‘passively’ comply with abusers” (James & Prout, 2005, p. 177).

The prevention programs offered by the CSC provide tools for adults to have these conversations with children. The photo conveys leadership in children and the purpose of the CSC, which is crucial in choosing an image to represent organizations in strategic communications (Patterson & Radtke, 2009). Respondents rated this cue on a five-point, Likert-type scale from (1) Strongly Disagree to (5) Strongly Agree. Three questions focused on the photo indicating if (1) the image of the child dressed as a superhero was pleasing (see Table
(10a), (2) made them more likely to join a prevention program (see Table 11a), and (3) donate their time or money (see Table 12a).

The third cue focused on the subhead about the prevention programs offered by the CSC. Participants responded to three questions on a five-point, Likert scale from (1) Strongly Disagree to (5) Strongly Agree. The questions asked if recipients found (1) the statement about joining the prevention programs not pleasing (see Table 10b), (2) made them more likely to join prevention programs (see Table 11b), and if (3) the statement made them more likely to donate time or money (see Table 12b). The fourth cue focused on the headline about fighting child abuse in Northwest Arkansas and used the same five-point, Likert scale in three questions. These questions asked whether (1) the statement was not pleasing (see Table 10c), (2) made them more likely to join a prevention program (see Table 11c), and (3) made participants more likely to donate (see Table 12c).

The survey also asked participants if the overall PSA was for individuals like themselves (see Table 9b) and if the PSA made it seem like child abuse prevention contributes to society (see Table 9a), because individuals that feel like an issue is their personal responsibility are more likely to donate or get involved with prevention programs with the CSC. Based on Nowak and Washburn’s (2000) study, individuals that trust the marketing source, see importance in the cause and feel personally responsible to help tend to have behavior changes towards said cause. Participants were asked in three questions, based on a five-point Likert scale, from (1) Strongly Disagree to (5) Strongly Agree, whether (1) they found the PSA not pleasing (see Table 10d), (2) the PSA made them more likely to join prevention programs (see Table 11d), (3) and if the PSA made them more likely to donate time or money (see Table 12d).
In order to provide further insight into the participants’ opinions and their ELM processing routes, the survey asked four open-ended questions focused on the overall PSA. These questions included the opinions of participants on their (1) favorite part of the PSA (see Table 13), (2) least favorite part of the PSA (see Table 14), (3) suggestions to improve the PSA (see Table 15) and (4) any other thoughts one may have about the PSA (see Table 16).

In order to use the appropriate media communications, participants were asked closed-ended questions about their personal communications with the CSC and their daily interaction with media channels. These included (1) where individuals have seen, heard or read anything in advertising, publicity or any other places about the CSC in the past three months (see Table 17), and if “yes” to question 17, individuals were prompted to select (2) where they heard, read or saw anything about the CSC (see Table 18). Individuals also reported on what medium they use most in their free time (see Table 19), followed by an open-ended question about their preferred method of contact from the CSC (see Table 20). This will help develop future communication techniques based on target market media channel preferences.

Finally, participants were asked in close-ended and open-ended questions to provide basic demographic information about their gender (see Table 21), race (see Table 22), employment status (see Table 23), level of completed education (see Table 24), marital status (see Table 25), household descriptions (see Table 26), household annual incomes (see Table 27), the total number of people in their households (see Table 28), and the age of each participant (see Table 29). Two questions asked participants if they (1) know anyone that has suffered from child abuse (see Table 30) and (2) if the participants knew anyone that had utilized the services offered by the CSC (see Table 31). This helped to gauge whether or not participants knew anyone that was eligible to use the CSC and whether eligible participants had utilized the CSC’s services.
The survey concluded with an open-ended question prompting participants to share anything else they wished about the CSC (see Table 32).

The survey gathered information on demographics, tested four cues about the ELM of the participants, provided communication preferences for the CSC and tested for personal relevance, while also providing an opportunity for participants to provide their opinion on the CSC and the overall PSA (see Appendix F for survey). These measures were used to assess whether and how respondents may have processed the PSA, either centrally or peripherally. While these results cannot determine how respondents actually processed the message using this type of convenience survey with a low response rate, results at least provide suggestions for analyzing and improving the PSA.

**Survey Results**

The survey response rate was 2.5 percent for partial completions (48 of 1,948) and 2 percent for total survey completions (39 of 1,948). Forty-eight individuals opened the survey, 43 participants provided responses and 39 individuals completed the survey. Given the very low response rate, results must be interpreted with extreme caution. The results may suggest that participants are very involved with children: 44 percent (19 of 43) currently volunteer with children while 44 percent (19 of 43) volunteered in the past (see Table 1). About half (49%) either currently work with children (23% or 10 of 43) or have worked with children in the past (26% or 11 of 43) (see Table 2). About two-thirds currently donate to the CSC (63% or 27 of 43) (see Table 3).

The CSC was the first organization that came to mind for 79 percent (34 of 43) of respondents when considering organizations that help victims of child abuse (see Table 4). Participants selected “prevention education” and “all of the above” as effective ways to fight
child abuse (see Table 5), reflecting that the respondents are educated on the best techniques for combating child abuse. About 70 percent of respondents agreed (51% or 20 of 43) or strongly agreed (20.5% or 8 of 43) that the PSA makes it seem like child abuse prevention contributes to society (see Table 9a). More than 70 percent agreed (46% or 18 of 43) or strongly agreed (26% or 10 of 43) that the PSA was for people like them (see Table 9b).

The survey tested whether four cues were pleasing: (1) the image of the child, (2) the statement about joining prevention programs, (3) the statement about fighting child abuse and (4) the overall PSA (see Tables 10a to 10d). The survey also tested whether these cues increased the likelihood to join prevention programs (see Tables 11a to 11d), and if it made participants more likely to donate (see Tables 12a to 12d).

More than 80 percent of participants agreed (44% or 17 of 39) or strongly agreed (41% or 16 of 39) that the superhero image of the child was pleasing (see Table 10a). About 42 percent agreed (37% or 14 of 38) or strongly agreed (5% or 2 of 38) that the image would make them more likely to join prevention programs (see Table 11a). About 50 percent agreed (44% or 17 of 39) or strongly agreed (5% or 2 of 39) that they would be more likely to donate because of the image (see Table 12a). These data results could suggest that the image of the child (a peripheral cue) may have been processed centrally by about half of participants due to the high response in behavior change to donate or join prevention programs. Other participants (about 30 percent) may have processed it peripherally because it did not entice behavior changes. Individuals that process peripherally are more likely to agree that the image is pleasing than they are to make behavioral changes, such as donating or joining prevention programs.

More than 80 percent of participants either disagreed (49% or 19 of 39) or strongly disagreed (38% or 15 of 39) that the statement about the prevention programs was NOT pleasing,
reflecting that most found it pleasing (see Table 10b). About 70 percent agreed (55% or 21 of 38) or strongly agreed (16% or 6 of 38) that they were more likely to join prevention programs because of the statement (see Table 11b). More than half also agreed (46% or 18 of 39) or strongly agreed (5% or 2 of 39) that they were more likely to donate because of the statement (see Table 12b). The data could suggest this statement may have been processed centrally by about 50 percent of participants and peripherally by 30 percent because those that process centrally are more likely to process the entire message and all the information that sparks behavior changes.

About 98 percent of respondents disagreed (54% or 21 of 39) or strongly disagreed (44% or 17 of 39) that the statement about fighting child abuse or the third cue was NOT pleasing, reflecting that respondents found the statement to be pleasing (see Table 10c). More than 70 percent of respondents also agreed (61% or 23 of 38) or strongly agreed (18% or 7 of 38) that they were more likely to join prevention programs because of the statement about fighting child abuse (see Table 11c). In addition, more than 60 percent of participants agreed (57% or 22 of 39) or strongly agreed (10% or 4 of 39) that they were more likely to donate because of the statement about fighting child abuse (see Table 12c). The data results could suggest that most participants may have processed the headline centrally, because about 60 to 70 percent of participants reported they were more likely to engage in behavioral changes, suggesting they may have had high levels of motivation to process the headline and the overall idea of the PSA.

The final cue testing the overall PSA found that 98 percent of participants disagreed (54% or 21 of 39) or strongly disagreed (44% or 17 of 39) that the PSA was NOT pleasing, which indicated that most found the PSA to be pleasing (see Table 10d). More than 70 percent agreed (61% or 23 of 38) or strongly agreed (13% or 5 of 38) that they were more likely to join
prevention programs because of the PSA (see Table 11d). More than half also agreed (51% or 20 of 39) or strongly agreed (5% or 2 of 39) they would be more likely to donate because of the PSA. Survey participants (98%) found the PSA to be pleasing, and about 70 percent of participants said they would participate in prevention programs or donate (55%) to the CSC due to the PSA. This data could suggest that more than half of respondents may have processed the PSA centrally and focused on the overall message, which may have persuaded them to potentially take behavioral action. Even though the data suggests some individuals may have processed the PSA peripherally, they still found the PSA to be pleasing (98%).

Most respondents said their favorite part of the PSA included the image of the child dressed as a superhero and the slogan (see Table 13). One respondent preferred “the image of the child and its portrayal of strength and spirit,” while another participant focused on the slogan or “the three P’s,” and some participants combined the two (PSA and slogan) as their favorite parts stating, “the image of the child dressed as a superhero with the 3 words beside it.”

Their least favorite parts of the PSA included the amount of text (see Table 14). One participant stated that the PSA was “too much text,” and another said it “seemed sort of wordy and I had to read it twice to comprehend.” Both the slogan and the image of the child were created as peripheral cues, but given that the least favorite part was the amount of text, it is possible that the central cues in the PSA may have been hard to focus on due to the amount of text.

Other critiques involved the lack of dates or links that provided information to sign up for the prevention programs on the PSA. One respondent stated, “No dates on education/trainings offered,” while another participant stated, “That it asks for em to help, but doesn’t say how I can help… like when I contact the program, do they want time or money?” The data could also
suggest that most participants may have processed the PSA’s overall message and its central cues through the central route of persuasion because they were asking for specific information relevant to participation.

With this high level of experience with children, knowledge about the CSC and ways to prevent child abuse, participants offered insightful, constructive criticism on how to improve the PSA. The PSA should have less text, provide links and information for program details and add statistics (see Table 15). Participants stated, “Some of the information is redundant, it would be easier to read and remember if it didn’t have so much text.” Another said, “Add times or highlight website to get more information,” stating that more information and contact links on the PSA were needed (see Table 16). One respondent suggested having “An easier ‘call to action’ … Like ‘call 479-xxx-xxx for quick and easy ways to get stated today.” Other participants focused on providing statistics in the PSA: “Maybe one hard statistic. To provide relevance to local people,” and “Maybe some quick powerful stats.”

Participants were asked if they saw anything about the CSC in the media during the last three months (see Table 17), and most (92% or 36 of 39) answered “yes.” More than 75 percent of participants said they saw, heard or read about the CSC on Facebook (78% or 28 of 36), or by “word of mouth” (56% or 20 of 36) (see Table 18). About half (46% or 18 of 39) selected Facebook as their most used medium, and about 30 percent (11 of 39) selected the Internet (see Table 19). However, the respondents’ preferred medium for CSC information included email (59% or 20 of 39), Facebook (12% or 4 of 39), and general social media (15% or 5 of 39) (see Table 20).
Limitations

The limitations of the thesis include using a convenience sample for the survey. The sample was provided by the CSC and is not an accurate representation of the target audience in Northwest Arkansas. The email recipients were already associated with the CSC and had prior experience with children. Board members, employees and other administrators were encouraged to fill out the survey by the development director; so many responses from the survey could have been from individuals directly associated or employed by the CSC. In addition, this convenience sample mainly represented married individuals (see Table 25), lacking feedback from single parents of the target market. About 40 percent of participants have a higher household annual income than the target market. In addition, about 44 percent do not have children, which differs from the primary target market in this thesis project. The target market was developed using data from child demographics based on annual reports from the CSC, city data in Washington County, along with the Bureau of Labor Statistics. The information from this survey could be skewed based on the familiarity associated with respondents and the CSC.

April is a major campaign month for the CSC, including a large amount of daily emails. Based on the heavy emailing period, it appears that the survey was overlooked by many individuals due to the mass amount of emails they were receiving from the CSC. It is possible there would have been a higher response rate if the survey was emailed during a period of low email contact instead of a heavy campaign period for the CSC. Staff members and the board of directors were encouraged by the development director to participate in the survey.
Recommendations

PSA Layout

Respondents offered helpful insight through open- and closed-ended questions about the overall PSA. Participants liked the photo and slogan (see Table 13), but the PSA was too wordy and did not highlight how to sign up or obtain information on the prevention programs (see Table 14). In addition, participants felt the PSA included redundant information, had too much text, should add contact links and information, and an easier call to action (see Tables 15 and 16). To address these suggestions, the original PSA (see Appendix G) was not changed, but two additional PSAs were created that included less text and brought attention to both the central and peripheral cues in the PSA. The CSC can choose which PSA to use on social media, in newsletters, emails and magazines and other print outlets (revision 1 see Appendix H, revision 2 see Appendix I). Revisions were made to edit out the body copy, creating more “white space” or “breathing room,” making the PSA easier to read and less overwhelming to the eye. In addition, the contact information was enlarged and moved towards the center of the PSA to make it easy to find and read. These revisions were based on the recommendations of participants.

The PSA should be used in a multimedia campaign with interactive contact links (per survey participants’ request) via email, social media and newsletter links. Include the PSA in press releases, newspapers and hand it out at the Fayetteville Farmer’s Market. Email and social media are important because email (59% or 20 of 39), Facebook (12% or 4 of 39), and general social media (15% or 5 of 39) were the preferred methods of contact (see Table 20).

Include the following message in an email message and newsletter with an interactive link on the PSA:

- Happy Monday! We are so excited to kick off the school year with our “Stewards of
Children” program THIS SATURDAY to help you prevent child abuse in Washington County. It is our responsibility to protect these children and the training is only two hours long. Two hours could make the difference in protecting your child. Provide. Prevent. Protect. (Sign-up below).

Social Media Recommendations

There are several recommendations to create consistency and clarity among the different CSC social media channels. First, increase prevention program content on all platforms by 25 percent. Include a consistent hashtag for the CSC prevention programs, posting prevention program content throughout the week and on a specific day of the week and publishing prevention program blogs twice a month.

Create consistency for all social media names and handles. Change all platform handles to @ChildrensSafetyCenter and all platform names to Children’s Safety Center. This is important because experts recommend creating consistent usernames or social media handles to help users navigate each platform, but if the same name cannot be secured, aim for brand consistency by using very similar names, such as @ChildSafety, to make all social presence cohesive (Lance, 2015).

Select a hashtag for the CSC prevention programs to create consistency on all social media channels, encouraging participants to utilize these hashtags on pictures or content they may post about the training session. Select one of the following hashtags for the social media prevention program posts:

- #CSCPreventionPrograms
- #CSCAbusePrevention
- #CSCPrevention
- #CSCPreventAbuse

Select the appropriate prevention program hashtag to pair with the hashtags mentioned above:
- #CSCStewardsofChildren
- #CSCEmpowerMe

Incorporate a hashtag throughout the week to focus on prevention program training sessions. This will create a brand for the prevention programs that social media users can expect to see throughout the week. For example, use a mission-focused hashtag on Tuesday or Thursday, consistent with the hashtags used by the CSC mentioned earlier (i.e. #MissionMonday, #WisdomWednesday, #FaceTheFactsFriday and #SpotlightSunday).

Select the appropriate hashtag to focus on prevention program training for either Tuesday or Thursday:
- #TrainingTuesday
- #TrainingThursday
- #PreventionTrainingTuesday
- #PreventionTrainingThursday

Post about prevention programs on Facebook and Instagram on Tuesday or Thursday. Use statistics and facts in examples (see Table 15), based on recommendations by survey participants. For example:

1. “Learn 5 ways to protect your children this Saturday! Our Stewards of Children child abuse prevention program training is offered to parents and adults that work with children. #TrainingTuesday #CSCPreventionPrograms #CSCStewardsOfChildren

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To learn more or to have a FREE Stewards of Children training at your organization or business, contact CSC Program Director Casey Atwood at casey@childrenssafetycenter.org.”

2. “The good things in life are FREE! Our “Empower Me!” program teaches children smart, safety rules in an empowering way and is FREE to elementary schools, after school programs, child care facilities, and any other youth-serving organizations. #TrainingTuesday #CSCPreventionPrograms #CSCEmpowerMe

Contact CSC Program Director Casey Atwood to receive this FREE training at casey@childrenssafetycenter.org.”

3. “90% of child victims of sexual abuse know their abuser. Protect your children and sign up for our Stewards of Children child abuse prevention programs that train parents and adults on recognizing child abuse. Contact CSC Program Director Casey Atwood at casey@childrenssafetycenter.org to sign up today. #TrainingTuesday

#CSCPreventionPrograms #CSCStewardsOfChildren”

The best times to post on Instagram are between 2 and 5 p.m., 2 a.m., and not more than twice a day, however, experts suggest only posting as long as it can be consistent and maintained. For example, organizations should not post nine times one week and only twice another week; consistency in the amount of posts on all platforms is key (Hughes, 2016).

Tweet organically about prevention programs offered by the CSC. This will create a real-time, conversation feel for Twitter followers. Post examples similar to the following on Twitter that focus on the CSC’s prevention programs:

1. “Learn 5 ways to protect your children this Saturday! Sign up with link in bio.

#CSCPreventionPrograms #CSCEmpowerMe #TrainingTuesday”
2. “Provide. Prevent. Protect. Sign up to empower and protect your children with our Empower Me program. Link in bio. #CSCPreventionPrograms #CSCEmpowerMe”

3. “90% of children who are victims of sexual abuse know their abuser. Protect your children here: (insert link for Stewards of Children) #CSCPrevention #CSCStewardsofChildren”

Tweet during prevention programs on Saturdays because the best days to post on Twitter are Wednesday, Saturday and Sunday. However, if a schedule cannot be followed, the best times to tweet are at 1 p.m. or between 12 and 6 p.m. (Hughes, 2016). Posting organically to Twitter is crucial because it is used for exchanging short messages that focus on events happening during the post. Twitter posts, such as the CSC’s 92 tweets that read, “I posted to Facebook,” should focus on communicating real-time messages that are not “spam.” Followers will criticize or unfollow the spammed account (Kaplan & Haelein, 2011).

Utilize the assistance of the Kappa Delta (KD) fraternity at the University of Arkansas. The focus of its philanthropy is the CSC, so fraternity members already intern there and organize fundraising events. Have a KD intern consistently post organic tweets. The intern should attend and tweet during Saturday training programs, gather photos, while also gaining real-world experience.

Create a social media style guide to be used by all staff and KD interns that post on social media. Major nonprofits such as Crystal Bridges Museum of American Art, New York University and the Terra Foundation for American Art use style guides. A guide would enable the intern to post content that is consistent with the established voice of the CSC. The guide is helpful in navigating evolving situations, such as the Development Director leaving or a marketing position being created, where the roles of social media change from one individual to
another. The recommended guide below is based a social media style guide published by New York University (Barrow & Reynolds, 2014).

The Children’s Safety Center - Social Media Style Guide

Created by: Morgan Rhodes

Style Guide Purpose

The purpose of this document is to create a baseline for the style used to post to the Children’s Safety Center social media accounts.

Privacy

Individuals that post to any social media account associated with the CSC are not allowed to post any photos of any children or clients, past or present, who were in, helped by, or associated with the center. Those who post on social media for the CSC are also not allowed to post any photos of any of these children or clients on any personal social media accounts or any other social media account. All photos of children or family clients must remain anonymous and must never be posted. The only possible exception is when these conditions are met, and only when all written consent forms and permissions discussed here are obtained and confirmed by the executive director of the CSC before anything is posted: 1) previous consent is given in writing, beforehand, by all parties, including signed consent forms; 2) the executive director of the CSC must give explicit permission in writing beforehand for a photograph or material in question to be used; and 3) the legal authority or representative of the CSC must give explicit permission in writing beforehand for a photograph or material in question to be used. When there is any doubt whatsoever about this exception, do not post. The primary concern is to protect the privacy of children and clients of the CSC.
Active Accounts:
- https://www.facebook.com/childrenssafetycenter/
- https://twitter.com/cscnwa
- https://www.instagram.com/cscnwa/

Social Media Voice

Who we are: Educated. Informative. Engaged. We value educating the Northwest Arkansas community on the issue of child abuse and ways they can be involved with our mission. We aren’t afraid to bring up touchy subjects, but we embrace the uncomfortable in order to advocate for the children.

Our tone: We are welcoming and excited about our work. We believe in the mission of the CSC and enjoy engaging in conversations and answering questions. We are optimistic, but do not shy away from stating hard facts. We tell the truth about child abuse in Washington County.

Ownership of Posts

All messages posted on any social media platforms use the voice and tone described above. We do not attach names or initials to posts.

Positivity and Transparency

We present our posts with an upbeat attitude, but we state the facts and do our best to inform the general public in an honest manner.

Regularly Used Hashtags

- #childrenssafetycenter
- #CSC
- #MissionMonday
- #TrainingTuesday
Additional Recommendations

Upload blog posts about the CSC prevention programs twice a month. Focus on each program and what individuals learned while attending the “Empower Me!” or “Stewards of Children.” Ask for volunteers to write a blog post about their experience at the training session. This would allow blog posts to be consistently written and include personal testimonies from participants. Once the rough draft is received, the CSC should edit and publish the blog with pictures taken by the intern at the session. This will show and tell other readers what to expect if they attend a prevention program. Provide tweets about and links to these blog posts on Twitter to increase overall awareness and increase web and blog click-rates (Safko, 2012).

Partner with the Single Parents Scholarship Fund of Northwest Arkansas (SPSF), to reach the first primary target market and focus on both internal and external issues that produce child maltreatment in single parent households. SPSF “works to help single parent families become financially stable and independent. We do this by providing direct financial assistance to low-income single parents who are pursuing a career-related course of study in order to gain sufficient employment to meet the basic needs of their families” (“Our mission,” 2012, p.1).
The SPSF can invite scholarship recipients to “Empower Me!” events to increase participation and raise awareness of the CSC. The source of child maltreatment needs to be addressed through preventative measures and resources for families suffering from child abuse and neglect. Including more single parents builds “the continuous interplay between individual and community environment in addressing the problem of child maltreatment” (Daro & Dodge, 2009, p. 69).

Finally, the CSC should partner with Kappa Delta and the Fayetteville Farmer’s Market to distribute blue pinwheels promoting CSC awareness and child abuse prevention. Pass out blue pinwheels to children and small printed PSAs to parents. Schedule this promotion once a month, on a Saturday within a week before any scheduled prevention program training. Include a sign-up sheet for those interested in attending the program training. In addition, place a donation box at the CSC table during the market. The CSC has an established brand with the blue pinwheels, so this combination of the PSA and the pinwheels can increase brand name awareness and associate the blue pinwheels with the prevention programs and the CSC. See Appendix J for Fayetteville Farmer’s Market sign-up information and guidelines (“Others at market,” 2017).

**Conclusion**

This social marketing plan was created through careful research on other nonprofit organizations, target market audiences in Northwest Arkansas, an online Qualtrics survey, annual reports by the CSC and through communications with the Development Director at the CSC. This plan was created to increase participation in the prevention programs “Stewards of Children” and “Empower Me!” while also creating awareness and behavior change to prevent child abuse in Washington County. The PSA was tested using a convenience survey of board members, staff, volunteers and other general public in the CSC email database. The CSC will
achieve the cognitive and conative objectives if it can implement these recommendations to help prevent child abuse in Northwest Arkansas through increased prevention program participants and CSC donors.
References


Tables

Table 1

**Type of Volunteer Experience with Children**

<table>
<thead>
<tr>
<th>Volunteer Experience Status</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currently volunteer</td>
<td>19</td>
<td>44.19</td>
</tr>
<tr>
<td>Never in past, but will in future</td>
<td>1</td>
<td>2.33</td>
</tr>
<tr>
<td>Do not currently, but have in past</td>
<td>19</td>
<td>44.19</td>
</tr>
<tr>
<td>Never in past and will not in future</td>
<td>2</td>
<td>4.65</td>
</tr>
<tr>
<td>Other*</td>
<td>2</td>
<td>4.65</td>
</tr>
</tbody>
</table>

*Other responses: I have once and would like to do it again in the future; volunteer for fundraising to help with children's programs, but never volunteer directly with children.

Table 2

**Type of Paid Work Experience with Children**

<table>
<thead>
<tr>
<th>Work Experience Status</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currently work</td>
<td>10</td>
<td>23.26</td>
</tr>
<tr>
<td>Never in past, but will in future</td>
<td>1</td>
<td>2.33</td>
</tr>
<tr>
<td>Do not currently, but have in past</td>
<td>11</td>
<td>25.58</td>
</tr>
<tr>
<td>Never in past and will not in future</td>
<td>18</td>
<td>41.86</td>
</tr>
<tr>
<td>Other*</td>
<td>3</td>
<td>6.98</td>
</tr>
</tbody>
</table>

*Other responses: I have never, but would in the future; I do work with children from time to time participating with High School events my company is involved with at the time; some children patients in the doctors office but not primary pediatric.

Table 3

**Type of Donation Experience with Children Advocacy Centers**

<table>
<thead>
<tr>
<th>Donation Status</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Currently donating</td>
<td>27</td>
<td>62.79</td>
</tr>
<tr>
<td>Never in past, but will in future</td>
<td>6</td>
<td>13.95</td>
</tr>
<tr>
<td>Do not currently, but have in past</td>
<td>8</td>
<td>18.60</td>
</tr>
<tr>
<td>Never in past and will not in future</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other*</td>
<td>2</td>
<td>4.65</td>
</tr>
</tbody>
</table>

*Other responses: I work there and cannot afford to donate; I have donated clothing and toys but not monetary donations.
Table 4

*First Organization that Comes to Mind that Helps Victims of Child Abuse*

<table>
<thead>
<tr>
<th>Organizations</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s Safety Center (CSC)</td>
<td>34</td>
<td>79</td>
</tr>
<tr>
<td>EOA Children’s House</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Department of Human Services (DHS)</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Court Appointed Special Advocates for children (CASA)</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Children’s Shelter</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 5

*Effective Ways to Fight Child Abuse: Select all that apply*

<table>
<thead>
<tr>
<th>Choices to Fight Child Abuse</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention education</td>
<td>22</td>
<td>51.16</td>
</tr>
<tr>
<td>Minimize opportunity for one-on-one interactions between adult and child</td>
<td>8</td>
<td>18.60</td>
</tr>
<tr>
<td>Talk openly about abuse with children</td>
<td>24</td>
<td>55.81</td>
</tr>
<tr>
<td>Stay alert and learn the signs of abuse</td>
<td>26</td>
<td>60.47</td>
</tr>
<tr>
<td>Make a plan, don’t overreact, offer support</td>
<td>15</td>
<td>34.88</td>
</tr>
<tr>
<td>Act on suspicion</td>
<td>21</td>
<td>48.84</td>
</tr>
<tr>
<td>Get involved financially and by volunteering</td>
<td>13</td>
<td>30.23</td>
</tr>
<tr>
<td>All of the above.</td>
<td>23</td>
<td>53.49</td>
</tr>
<tr>
<td>None of the above.</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other*</td>
<td>3</td>
<td>6.98</td>
</tr>
</tbody>
</table>

*Other responses: Prosecute abuse; higher punishment on abusers; Stricter Punishment for Offenders.

**Note: Multiple responses given by single participants, so over 100%
Table 6

Explanation of the Primary Message of PSA

Responses

Prevention Education
- Prevention Education
- Education about preventing Child Abuse
- Prevention and Education
- Education for prevention
- We can all be educated to prevent child abuse
- Educate folks about preventing child abuse
- Teaching about how to prevent child abuse
- To help educate parents and prevent child abuse

Prevention
- There are way to prevent child abuse.
- Prevent child abuse
- children are important, we want to prevent abuse for future generations
- Prevention
- Prevention
- Child abuse prevention
- Prevention
- prevention of child abuse
- The message is to make adults aware of the prevention programs available to help fight child abuse in Washington County.
- Involvement with learn child abuse prevention measures
- Getting the word out to the public about prevention programs
- Prevention of Child Abuse
- Child Abuse Prevention
- Prevent Child Abuse

Education
- Provide information on how to educate the public on child abuse.
- That the CSC is a resource for child abuse education as well as a place for refuge/protection.
- Education
- Education

Fight Child Abuse
- how to fight child abuse
- Methods to learn to fight child abuse
- Empower parents and those that work with children to help fight child abuse.
- Fight and help with child abuse
- Fight Child Abuse
- To enable community to learn how to help fight child abuse.
### Table 6 (cont.)

*Explanation of the Primary Message of PSA*

<table>
<thead>
<tr>
<th>Empower Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Empowering children to tell</td>
</tr>
<tr>
<td>- Empower child</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>- It's a safe place and they can help</td>
</tr>
<tr>
<td>- teach parents how to better protect their children</td>
</tr>
</tbody>
</table>
Table 7

*Perception of Slogan “Provide. Prevent. Protect.” Scale from (1) Negative to (5) Positive*

<table>
<thead>
<tr>
<th>Perception</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Negative)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Somewhat negative)</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>4 (Somewhat positive)</td>
<td>21</td>
<td>53.85</td>
</tr>
<tr>
<td>5 (Positive)</td>
<td>13</td>
<td>33.33</td>
</tr>
</tbody>
</table>

*Note: Mean value of 4.18*
Table 8

Explanation of Slogan Perception

Perception

Positive/emotional/memorable
- 3 P's--easy to remember and makes sense w/the mission/purpose
- The words are all positive however the issue they are related to is the opposite so I struggle with answering "extremely positive" because of the negative feelings I have about the abuse of children.
- I love the overall message of keeping children safe.
- Good use of alliteration and touches on 3 keystones to eliminating child abuse
- It's easy to remember, but vague
- Prevention and protection are a good thing
- As a mom I am naturally drawn to feel this way about children
- It is simple and easy to understand
- They are all positive words that would contribute to a safe environment.

Positive/call to action
- I like the call to action.
- Action oriented, positive words
- It's action oriented and the words invoke a feeling of empowerment.

Educate
- it seems educationally based. If people are more informed then they know the signs to look for.
- Instructs adults to educate children

Defined “Provide, Prevent, Protect”
- I think it means provide resources, prevent abuse, protect children.
- We can have positive outcomes if we protect our kids by providing prevention trainings
- Provide education to prevent child abuse and protect children
- If you provide a safe place for children you are preventing child abuse and protecting the kids
- Because it makes sense that we need to provide support for the abused, prevent abuse when we can and protect our children.

Adult responsibility/child benefit
- It's our duty as adults!
- These are words that describe what all adults should do for children in general.
- They're all things we should do for children.
- I think it is a direct to the point statement of how to help children
- because it genuinely seems to be a benefit for the child, not the organization

Message Simplicity/Strength
- It seems secure and proactive.
Table 8 (cont.)

*Explanation of Slogan Perception*

- It's strong
- Its a simplified way for the community to understand what Stewards of Children and Empower me are trying to do.
- It simply states the goals of the program
- It's concise and covers what I image to be the main tenets of the CSC.
- Covers all aspects in succinct way
- Less taboo way of talking about child abuse

**Other**
- The child with a cape
- The words are not as impactful as a non-alliteration could be. provide in particular is not resonating with me
- Not enough information for it to be any more than Neutral.
- Prevent and protect are hard depending on circumstances takes time education etc.
- I am not sure what is being provided. I get the prevent and protect part of it.
Table 9a

PSA makes it seem like child abuse prevention contributes to society:
Scale from (1) Strongly disagree to (5) Strongly agree

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>3</td>
<td>7.7</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>8</td>
<td>20.5</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>20</td>
<td>51.3</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>8</td>
<td>20.5</td>
</tr>
</tbody>
</table>

*Note: Mean value of 3.85

Table 9b

PSA is for people like me: Scale from (1) Strongly disagree to (5) Strongly agree

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>7</td>
<td>17.95</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>18</td>
<td>46.15</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>10</td>
<td>25.64</td>
</tr>
</tbody>
</table>

*Note: Mean value of 3.85

Table 10a

Image of Child is Pleasing: Scale from (1) Strongly disagree to (5) Strongly agree

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>6</td>
<td>15.38</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>17</td>
<td>43.59</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>16</td>
<td>41.03</td>
</tr>
</tbody>
</table>

*Note: Mean value is 4.26
Table 10b

*Statement about Prevention Programs is NOT pleasing:*
*Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>15</td>
<td>38.46</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>19</td>
<td>48.72</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>1</td>
<td>2.56</td>
</tr>
</tbody>
</table>

*Note: Mean value is 1.87*

Table 10c

*Statement about fighting child abuse is NOT pleasing:*
*Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>17</td>
<td>43.59</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>21</td>
<td>53.85</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Note: Mean value is 1.59*

Table 10d

*PSA was NOT pleasing: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>17</td>
<td>43.59</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>21</td>
<td>53.85</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Note: Mean value is 1.59*
Table 11a

*More Likely to Join Prevention Programs because Image of Child: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>5</td>
<td>13.16</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>17</td>
<td>44.74</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>14</td>
<td>36.84</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>2</td>
<td>5.26</td>
</tr>
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</table>

*Note: Mean value is 3.34*

Table 11b

*More Likely to Join Prevention Programs because Prevention Programs Statement: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>3</td>
<td>7.89</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>8</td>
<td>21.05</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>21</td>
<td>55.26</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>6</td>
<td>15.79</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.79*

Table 11c

*More Likely to Join Prevention Programs because Fighting Child Abuse Statement: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>8</td>
<td>21.05</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>23</td>
<td>60.53</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>7</td>
<td>18.42</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.97*
Table 11d

*More Likely to Join Prevention Programs because of PSA: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>2</td>
<td>5.26</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>8</td>
<td>21.05</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>23</td>
<td>60.53</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>5</td>
<td>13.16</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.82*

Table 12a

*More Likely to Donate because Image of Child: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>5</td>
<td>12.82</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>14</td>
<td>35.9</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>17</td>
<td>43.59</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>2</td>
<td>5.13</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.36*

Table 12b

*More Likely to Donate because Prevention Programs Statement: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>7</td>
<td>17.95</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>12</td>
<td>30.77</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>18</td>
<td>46.15</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>2</td>
<td>5.13</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.38*
Table 12c

*More Likely to Donate because Fighting Child Abuse Statement: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>9</td>
<td>23.08</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>22</td>
<td>56.41</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>4</td>
<td>10.26</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.67*

Table 12d

*More Likely to Donate because of PSA: Scale from (1) Strongly disagree to (5) Strongly agree*

<table>
<thead>
<tr>
<th>Level of agreeability</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 (Strongly disagree)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2 (Disagree)</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>3 (Neutral)</td>
<td>13</td>
<td>33.33</td>
</tr>
<tr>
<td>4 (Agree)</td>
<td>20</td>
<td>51.28</td>
</tr>
<tr>
<td>5 (Strongly agree)</td>
<td>2</td>
<td>5.13</td>
</tr>
</tbody>
</table>

*Note: Mean value is 3.5*
Table 13

Favorite part of PSA

Responses

Image of child dressed as superhero
- The child dressed as a super hero.
- The graphics
- The photo
- The image of the child and its portrayal of strength and spirit
- The child in the superhero costume
- The image of the child.
- Image of child feeling empowered.
- Lifestyle image of child. Empowering
- Image & word empower
- The picture of the kid
- The child dressed as a super hero
- Cute kiddo in a cape
- The child dressed as a super hero
- The image of the child dressed as a super hero

- Positive key words "empower" "protect"
- Protect
- provide.prevent.protect
- Provide, prevent, protect
- The three P's
- Simple slogan
- Provide.Prevent.Protect.
- prevention We need more about prevention and steps to be taken

Image/slogan
- the child dressed as a superhero and the three words
- Child pointing at the 3P's
- The image of the child dressed as a super hero with the 3 words beside it.

Other
- simply and easy to read
- education
- The class for parents about preventing sexual abuse.
- Helping kids
- It's not just another solicitation
- There are number of initiatives packed into a concise one pager.
- The purpose seems clear
- When it tells you what the classes provide.
- The mission statement
Table 13 (cont.)

*Favorite part of PSA*

- The word Empower
- Does not come across as scary for the kids who see it.
- I tries to help kids.
Table 14

*Least favorite part of PSA*

**Responses**

Too much text to read
- reading the copy under the picture
- too much text
- It seemed sort of wordy and I had to read it twice to comprehend
- Very copy heavy and several messages
- Too wordy
- too wordy
- lots of words

Image of child dressed as superhero
- The photo
- Child as superhero photo
- I do not like the mask on the child's face

Word choice
- "Provide." I think it means to provide resources, but it is a tad confusing.
- Possibly the use of the word "Fight." I, of course, get it, but could there be another word to use and be as effective?
- The word provide.

None
- None
- none
- none
- nothing
- n/a
- I don't have a least favorite
- None
- all OK
- N/A
- NA
- Nothing

Other
- Least favorite- the fact that child abuse exists..
- It doesn't really appeal to ways that I think I could participate actively in.
- The PSA does not target people without children who would have more time to volunteer their time.
- Show how abuse affects the community
- The "Empower Me!" in red seems oddly placed.
- No dates on education/trainings offered
- Not as effective as some of the stronger ones I have seen
Table 14 (cont.)

**Least favorite part of PSA**

- It doesn't pull on the heart strings enough to push me to donate
- That it asks for em to help, but doesn't say how I can help... like when I contact the program, do they want time or money?
Table 15

*How to improve the PSA*

**Responses**

**Simple, less text**
- Some of the information is redundant, it would be easier to read and remember if it didn't have so much text.
- make the words more simple because sometimes people just glance at these things
- Clean up copy and streamline message. Choose one thing to day
- Too much to read
- shorter to the point. Lots of verbiage prevents me from reading it all at a glance
- clearer concise communication

**Add statistics**
- Maybe one hard statistic. To provide relevance to local people.
- Maybe some quick powerful stats

**Provide links/info for program details**
- Link directly to the program details website
- Will the links on the image be interactive?
- Add times or highlight website to get more information

**More emotion**
- Tell a story that hits home
- More emotional.

**Different font/photo**
- Better font
- Maybe a photo with more than one child?
- different image of a child - one that you can see the eyes.
- not a fan of the thin font
- The message is overall positive I'd like to see the child smiling

**Other**
- Maybe add a couple more words to the program descriptions so people know what they are.
- explain the 3 P's a little better/clearer
- NA
- none
- I like it
- n/a
- not sure
- The marketing of the PSA needs to be improved.
- Maybe further convey the severity of the abuses that are happening. I know, tough fine line.
Table 15 (cont.)

*How to improve the PSA*

- all OK
- N/A
- More information about what the safety center does.
- I think a second PSA created to spur donation with victim stories may open the purse strings a bit more.
- Indicate specific ways to help.


Table 16

Additional thoughts about the PSA

Responses

Provide more information/links for contact
- maybe does not tell me enough about the new programs
- I would include volunteer opportunities on the PSA.
- No links to sign up for the classes.
- An easier "call to action" ... Like "call 479-xxx-xxxx for quick and easy ways to get started today"

Change font/photo
- I like it. Only thing I might change is the font of the three P's. I think it could look more powerful than it does in it's current state.
- The photo doesn't match the message. The child is the victim and it's about empowering and educating adults to fight - not the child. It would make more sense to me to show a helpless child or adults in the superhero costumes.

Positive, emotional
- Love it
- I love that this information is out there. It's an important message that people turn a blind eye to.
- Wonderful PSA. It's to the point, covers multiple initiatives, it shows where to go for those willing to help, and it shows where to go for those that need help.
- Looking good!!
- all OK
- Overall good
- Like the child superhero and if I were a parent, it would cause me to want to educate myself and my child.
- Overall I think it is motivational and eye catching.
- Overall I liked it, Very clear message.

More emotion
- Tell a story that hits home for donations and volunteers
- It is pleasing, but could be more emotional to get the attention of people.

Other
- is this for parents, teachers, kids? unclear of audience
- NA
- none
- None
- n/a
- NA
- there is no direct or indirect financial ask.
- None
Table 17

**Children’s Safety Center in the Media within Last Three Months**

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>36</td>
<td>92.31</td>
</tr>
<tr>
<td>No (Skip Question 18)</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>Not Sure (Skip Question 18)</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 18

**Medium Where Saw or Read about Children’s Safety Center**

<table>
<thead>
<tr>
<th>Medium</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Television</td>
<td>5</td>
<td>13.89</td>
</tr>
<tr>
<td>Internet</td>
<td>12</td>
<td>33.33</td>
</tr>
<tr>
<td>Newspaper</td>
<td>3</td>
<td>8.33</td>
</tr>
<tr>
<td>Radio</td>
<td>1</td>
<td>2.78</td>
</tr>
<tr>
<td>Facebook</td>
<td>28</td>
<td>77.78</td>
</tr>
<tr>
<td>Twitter</td>
<td>4</td>
<td>11.11</td>
</tr>
<tr>
<td>Other social media</td>
<td>12</td>
<td>33.33</td>
</tr>
<tr>
<td>Word of mouth</td>
<td>20</td>
<td>55.56</td>
</tr>
<tr>
<td>Flyer</td>
<td>11</td>
<td>30.56</td>
</tr>
<tr>
<td>Other*</td>
<td>13</td>
<td>36.11</td>
</tr>
</tbody>
</table>

*Other responses: CitiScapes; Leadership Fayetteville; magazine; Email; event; breakfast; magazine; Local Magazines; email; I follow it on Facebook; Fayetteville Leadership Class; email; I visited an open house at the center and I am in the Fayetteville Chamber with an advocate for the center

**Note: Multiple responses given, percentages over 100%**
Table 19

*Most Used Medium*

<table>
<thead>
<tr>
<th>Medium</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Television</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Internet</td>
<td>11</td>
<td>28.21</td>
</tr>
<tr>
<td>Newspaper</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Radio</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Facebook</td>
<td>18</td>
<td>46.15</td>
</tr>
<tr>
<td>Twitter</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other social media</td>
<td>5</td>
<td>12.82</td>
</tr>
<tr>
<td>Word of mouth</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Other*</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Note: Multiple responses given, percentages over 100%*

Table 20

*Preferred Medium for Children’s Safety Center Information*

<table>
<thead>
<tr>
<th>Medium</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facebook</td>
<td>4</td>
<td>11.76</td>
</tr>
<tr>
<td>Instagram</td>
<td>1</td>
<td>2.94</td>
</tr>
<tr>
<td>Email</td>
<td>20</td>
<td>58.82</td>
</tr>
<tr>
<td>Social Media</td>
<td>5</td>
<td>14.71</td>
</tr>
<tr>
<td>Online/Internet</td>
<td>2</td>
<td>5.88</td>
</tr>
<tr>
<td>Newspaper</td>
<td>1</td>
<td>2.94</td>
</tr>
<tr>
<td>N/A</td>
<td>1</td>
<td>2.94</td>
</tr>
</tbody>
</table>

Table 21

*Participant Gender*

<table>
<thead>
<tr>
<th>Gender</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>11</td>
<td>28.21</td>
</tr>
<tr>
<td>Female</td>
<td>28</td>
<td>71.79</td>
</tr>
<tr>
<td>Prefer not to disclose</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 22

**Participant Race**

<table>
<thead>
<tr>
<th>Race</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American/Black</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Caucasian/White</td>
<td>37</td>
<td>94.87</td>
</tr>
<tr>
<td>Native American/American Indian</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Prefer not to disclose</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 23

**Employment Status**

<table>
<thead>
<tr>
<th>Status</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed full-time</td>
<td>37</td>
<td>94.87</td>
</tr>
<tr>
<td>Employed part-time</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Freelance worker</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Self-employed</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Unemployed, looking for work</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Unemployed, not looking for work</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Retired</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Student</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 24

**Level of school completed**

<table>
<thead>
<tr>
<th>School completed</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some high school</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>High school diploma</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Some college credit</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Trade/technical/vocational training</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Associate degree</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Some college</td>
<td>4</td>
<td>10.26</td>
</tr>
<tr>
<td>Bachelor’s degree</td>
<td>21</td>
<td>53.85</td>
</tr>
<tr>
<td>Master’s degree</td>
<td>5</td>
<td>12.82</td>
</tr>
<tr>
<td>Professional degree</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Doctorate degree</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
Table 25

Marital Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never married</td>
<td>5</td>
<td>12.82</td>
</tr>
<tr>
<td>Married</td>
<td>30</td>
<td>76.92</td>
</tr>
<tr>
<td>Divorced</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Widowed</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Unmarried, but living with partner</td>
<td>2</td>
<td>5.13</td>
</tr>
<tr>
<td>Other</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 26

Household Description

<table>
<thead>
<tr>
<th>Status</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>One child</td>
<td>7</td>
<td>17.95</td>
</tr>
<tr>
<td>Multiple children</td>
<td>12</td>
<td>30.77</td>
</tr>
<tr>
<td>No children, do not plan for any in the future</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>No children, would like to have them in the future</td>
<td>14</td>
<td>35.9</td>
</tr>
<tr>
<td>Other*</td>
<td>3</td>
<td>7.69</td>
</tr>
</tbody>
</table>

*Other responses: My children are grown already; I have no children, but plan to adopt in the next 5 years; one child and pregnant currently.

Table 27

Household Annual Income

<table>
<thead>
<tr>
<th>Income Range</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to $24,999</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>$25,000-$49,999</td>
<td>4</td>
<td>10.53</td>
</tr>
<tr>
<td>$50,000-$74,999</td>
<td>9</td>
<td>23.68</td>
</tr>
<tr>
<td>$75,000-$99,999</td>
<td>8</td>
<td>21.05</td>
</tr>
<tr>
<td>$100,000 or more</td>
<td>15</td>
<td>39.47</td>
</tr>
<tr>
<td>Prefer not to disclose</td>
<td>2</td>
<td>5.26</td>
</tr>
</tbody>
</table>
Table 28

Total number residing in household

<table>
<thead>
<tr>
<th>Number of Residents</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>12.82</td>
</tr>
<tr>
<td>2</td>
<td>15</td>
<td>38.46</td>
</tr>
<tr>
<td>3</td>
<td>8</td>
<td>20.51</td>
</tr>
<tr>
<td>4</td>
<td>8</td>
<td>20.51</td>
</tr>
<tr>
<td>5</td>
<td>3</td>
<td>7.69</td>
</tr>
</tbody>
</table>

Table 29

Participant Age

<table>
<thead>
<tr>
<th>Age</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>25-34</td>
<td>14</td>
<td>35.89</td>
</tr>
<tr>
<td>35-44</td>
<td>15</td>
<td>38.46</td>
</tr>
<tr>
<td>45-54</td>
<td>3</td>
<td>7.69</td>
</tr>
<tr>
<td>55-64</td>
<td>2</td>
<td>5.12</td>
</tr>
<tr>
<td>65+</td>
<td>2</td>
<td>5.12</td>
</tr>
</tbody>
</table>

Table 30

Know Child Abuse Victim

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>24</td>
<td>61.54</td>
</tr>
<tr>
<td>No</td>
<td>12</td>
<td>30.77</td>
</tr>
<tr>
<td>Prefer not to disclose</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Other*</td>
<td>2</td>
<td>5.13</td>
</tr>
</tbody>
</table>

*Other responses: I’m sure I do, but not that has been disclosed to me; I’m sure I do, but not currently aware.
Table 31

Know Someone that Used CSC Services

<table>
<thead>
<tr>
<th>Response</th>
<th>Number</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>8</td>
<td>20.51</td>
</tr>
<tr>
<td>No</td>
<td>29</td>
<td>74.36</td>
</tr>
<tr>
<td>Prefer not to disclose</td>
<td>1</td>
<td>2.56</td>
</tr>
<tr>
<td>Other*</td>
<td>1</td>
<td>2.56</td>
</tr>
</tbody>
</table>

*Other Responses: I am unsure where this child went for services

Table 32

Additional thoughts about the CSC

Responses

Positive, thankful
- I am glad there is a quality facility like this available in NWA
- What they do for the community is amazing and needed more than the public would like to acknowledge
- I’m so happy the CSC exists!
- Former KD and the CSC has a special place in my heart
- I’m grateful for the CSC in NWA.
- Great staff and team and mission!
- Great Organization
- The CSC has helped more than 8000 children in our community since 1997.

Awareness
- I think that if more people knew about it then they would have more donations. I was not aware of the Center until I became a member of the Chamber. I have lived in Fayetteville my whole life.

None
- not at this time.
- no
- No
- no
- No
Appendices

Appendix A – Martial Status for Washington County Males

Appendix B – Marital Status for Washington County Females

Appendix C – Races in Washington County, Arkansas

Appendix D – Across Race and Ethnicity, Women Waiting Longer to Have Kids

Across Race And Ethnicity, Women Waiting Longer To Have Kids

Age of first birth in 2000 vs. 2014, by race and ethnicity

Total
Asian/Pacific Islander
Cuban
White (non-Hispanic)
Central/South American
Black (non-Hispanic)
Puerto Rican
Mexican
American Indian/Alaska Native

Average age of first-time moms keeps climbing in the U.S. National Public Radio.
Appendix E – Sample Email

Hello,

You are being asked to participate in an online survey for the Children’s Safety Center of Washington County, Arkansas. You were chosen to participate in this survey because of your current or past affiliation with the Children’s Safety Center. We are seeking your opinion to help the children’s advocacy center better communicate with you and others. This survey will take approximately 20 minutes to complete, and your responses will be used to craft messages to better suit your communication needs and create an effective process for sharing information on the children’s advocacy center, volunteering, donation and child abuse prevention. We will not ask you for your name or other contact information. Your response will be anonymous.

If you would like to know the results of the survey, once it has been completed, you may contact me, Morganne Rhodes, mxr073@uark.edu, or my faculty advisor, Dr. Jan L. Wicks, jwicks@uark.edu.

The University of Arkansas Institutional Review Board for human subjects research has reviewed this project. If you have any questions or concerns about your participant rights, you may contact Ro Windwalker, the IRB Coordinator, by email irb@uark.edu or by phone 479-575-2208.

If you would like to help us by taking the survey, please click the appropriate link below. Once you have started the survey, you may opt out any time by closing your browser window.

Yes, I want to participate.  No, I do not want to participate.

Regards,

Morganne K. Rhodes, Candidate for MA in Journalism
University of Arkansas
870-514-0381
mxr073@uark.edu
Appendix F – Survey and Introduction

Thank you for your participation. We are seeking your opinions to help the Children’s Safety Center to better communicate with you. The study will take about 20 minutes to complete. All of your responses will be used to craft messages to better suit your needs and create an effective outlet for information about child abuse services and prevention. Your responses will be kept confidential to the extent allowed by law and University policy, and you will not be identified in any report, published or unpublished. All responses will be tabulated by groups of responses to a question, so no individual is ever identified, and the results will only be used to tailor public service announcements based on your advice and for the purposes of this study.

Principal Researcher

Morganne K. Rhodes, Candidate for MA in Journalism

University of Arkansas

(870) 514-0381

Mxr073@uark.edu

Faculty Advisor

Dr. Jan L. Wicks

University of Arkansas

jwicks@uark.edu
WHAT YOU SHOULD KNOW ABOUT THE RESEARCH STUDY

What is the purpose of this research study?

The purpose of this study is to identify trends in motivation for volunteering and donating to the Children’s Safety Center in order to create a campaign that will aid in preventing child abuse, and increasing volunteering and donations in the future.

Who will participate in this study?

Participants are current newsletter recipients from the Children’s Safety Center via email.

What am I being asked to do?

Your participation will require filling out an online survey that is anticipated to take 20 minutes.

What are the possible risks or discomforts?

There are no anticipated risks to participating in this survey.

What are the possible benefits of this study?

There are no anticipated personal benefits to participating in this study. The benefits to the Children’s Safety Center include developing messages to more effectively communicate with potential volunteers, donors and individuals targeted for prevention training.

How long will the study last?

Participation includes a one-time survey that is anticipated to take 20 minutes to complete.

Will I receive compensation for my time and inconvenience if I choose to participate in this study?

No, there will be no compensation associated with your participation.

Will I have to pay for anything?

No, there will be no cost associated with your participation.
What are the options if I do not want to be in the study?

If you do not want to be in this study, you may refuse to participate. Also, you may refuse to participate at any time during the study. Your affiliation with the Children’s Safety Center will not be affected in any way if you refuse to participate.

How will my confidentiality be protected?

All information will be kept confidential to the extent allowed by applicable State and Federal law. To ensure additional confidentiality, all data and responses collected will remain anonymous. You will not be asked to provide your name or any other contact information.

Will I know the results of the study?

At the conclusion of the study you will have the right to request feedback about the results. You may contact the faculty advisor, Dr. Jan L. Wicks (jwicks@uark.edu) or Principal Researcher, Morganne K. Rhodes (mxr073@uark.edu). You may print a copy of this form for your files.

What do I do if I have questions about the research study?

You have the right to contact the Principal Researcher or Faculty Advisor as listed below for any concerns that you may have.

Principal Researcher

Morganne K. Rhodes, Candidate for MA in Journalism

University of Arkansas

(870) 514-0381

Mxr073@uark.edu

Faculty Advisor

Dr. Jan L. Wicks

University of Arkansas

jwicks@uark.edu

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You may also contact the University of Arkansas Research Compliance office listed below if you have questions about your rights as a participant, or to discuss any concerns about, or problems with the research.

Ro Windwalker, CIP
Institutional Review Board Coordinator
Research Compliance
University of Arkansas
109 MLKG Building
Fayetteville, AR 72701
479-575-2208
irb@uark.edu

Please click ‘CONTINUE’ to proceed to survey.
1. Which of the following best describes your unpaid, volunteer experience with children (including for nonprofits, church groups, after school programs, etc.)? (Select one only.)

[ ] I currently volunteer with children.
[ ] I have never volunteered with children, but I will in the future.
[ ] I currently do not volunteer with children, but I have in the past.
[ ] I have never volunteered with children and I do not plan to in the future.
[ ] Other (please specify).

2. Which of the following best describes your paid, work experience with children (including as teachers, doctors, daycare workers, social workers, etc.)? (Select one only.)

[ ] I currently work with children.
[ ] I have never worked with children, but I will in the future.
[ ] I currently do not work with children, but I have in the past.
[ ] I have never worked with children and I do not plan to in the future.
[ ] Other (please specify).

3. Which of the following best describes your donation experience with children advocacy centers? (Select one only.)

[ ] I am currently donating to a children advocacy center.
[ ] I have never donated to a children advocacy center, but I will in the future.
[ ] I am currently not donating to a children advocacy center, but I have in the past.
[ ] I have never donated to a children advocacy center and I do not plan to in the future.
[ ] Other (please specify).

4. What is the first organization that comes to mind when you think of helping victims of child abuse? (Please specify.)

_________________________________________________________

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5. Which of the following do you think are effective ways to fight child abuse? (Check all that apply.)

[ ] Prevention education
[ ] Minimize opportunity for one-on-one interactions between adult and child
[ ] Talk openly about abuse with children
[ ] Stay alert and learn the signs of abuse
[ ] Make a plan, don’t overreact, offer support
[ ] Act on suspicion
[ ] Get involved financially and by volunteering
[ ] All of the above.
[ ] None of the above.
[ ] Other (please specify) __________________________________________________________

___________________________________________________________

___________________________________________________________

.
Please read the entire public service announcement (PSA) shown below. Next, please answer questions 6 through 17 based on the PSA. Please indicate how much you agree or disagree with each statement about this PSA.

Fight child abuse in Northwest Arkansas

Provide. Prevent. Protect.

Join the Children’s Safety Center’s new prevention programs to fight child abuse

Stewards of Children
Educates school counselors, teachers and parents on body safety education curriculum

Empower Me!
Teaches parents 5 steps to protect their children from sexual abuse

The Children’s Safety Center of Washington County empowers children to overcome abuse and begin to trust, hope and heal.
Please help. If you suspect child abuse, call the Arkansas Child Abuse Hotline at 1-800-482-5964. Or contact us to find out other ways you can help.

479.872.6183
614 E. Emma, Suite 200 Springdale, AR 72764
www.childrenssafetycenter.org
6. What do you believe is the primary message in the PSA?

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________


*Make a selection from 1 to 5 to indicate how positive or negative you perceive the statement, where 1 means you perceive the statement as negative and 5 means you perceive the statement as positive.*

<table>
<thead>
<tr>
<th>Negative</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Provide. Prevent. Protect.</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Why do you perceive “Provide. Prevent. Protect.” this way?

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________
9. Please indicate whether you (1) strongly disagree, (2) disagree, (3) neutral, (4) somewhat agree or (5) agree with the following statements about the public service announcement (PSA):

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The PSA makes it seem like child abuse prevention contributes to society.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>This PSA is for people like me.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


10. Please select your level of agreement with the following statements about how pleasing the PSA was. **Pleasing is defined as personally enjoyable or creating a positive attitude.** Please indicate whether you (1) strongly disagree, (2) disagree, (3) neutral, (4) somewhat agree or (5) agree with the following statements about the PSA:

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I found the image of the child dressed as a superhero pleasing.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>I found the statement in the PSA about joining prevention programs not pleasing.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I found the statement in the PSA about fighting child abuse not pleasing.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The public service announcement was not pleasing.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
11. Please select your level of agreement with the following statements about the PSA and prevention programs.

Please indicate whether you (1) strongly disagree, (2) disagree, (3) neutral, (4) somewhat agree or (5) agree with the following statements about the PSA:

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The image of the child dressed as a superhero made me more likely to join a prevention program.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. The statement in the PSA about prevention programs made me more likely to join prevention programs.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. I found the statement in the PSA about fighting child abuse made me more likely to join prevention programs.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. The public service announcement made me more likely to join prevention programs.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
12. Please select your level of agreement with the following statements about the PSA and donation. Donate can be defined as the giving of a monetary value (money or gift) or the giving of time (volunteering). Please indicate whether you (1) strongly disagree, (2) disagree, (3) somewhat disagree, (4) neutral, (5) somewhat agree, (6) agree or (7) strongly agree with the following statements about the public service announcement.

<table>
<thead>
<tr>
<th></th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>The image of the child dressed as a superhero made me more likely to donate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I found the statement in the PSA about joining prevention programs made me more likely to donate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I found the statement in the PSA about fighting child abuse made me more likely to donate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The public service announcement made me more likely to donate.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
13. What is your favorite part of the PSA?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

14. What is your least favorite part of the PSA?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

15. How could the PSA be improved?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

16. What other thoughts do you have about the PSA?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

17. In the past three months, have you heard, seen or read anything in advertising, publicity, the media or other places about the Children’s Safety Center?

[ ] Yes
[ ] No
[ ] Not Sure
18. [If “Yes” to Q17] Where did you hear, see or read anything about the Children’s Safety Center? Select all that apply.

- Television
- Internet
- Newspapers
- Radio
- Facebook
- Twitter
- Other social media
- Word of mouth
- Flyer
- Other ____________________________

19. What medium do you spend most of your free time using? (Choose only one.)

- Television
- Internet
- Newspapers
- Radio
- Facebook
- Twitter
- Other social media
- Word of mouth
- Other ____________________________

20. How would you prefer to receive information about the Children’s Safety Center?

____________________________________________________________________

21. What is your gender?

- Female
- Male
- Prefer not to disclose
22. Please select your race:

- [ ] African American or Black
- [ ] Asian/Pacific Islander
- [ ] Hispanic/Latino
- [ ] Caucasian/White
- [ ] Native American/American Indian
- [ ] Prefer not to disclose
- [ ] Other (Specify)

23. Please select your employment status:

- [ ] Employed full-time
- [ ] Employed part-time
- [ ] Freelance worker
- [ ] Self-employed
- [ ] Unemployed and looking for work
- [ ] Unemployed and not looking for work
- [ ] Retired
- [ ] Student
- [ ] Other (Specify)

24. Please select your last completed level of schooling:

- [ ] Some high school
- [ ] High school diploma
- [ ] Some college credit
- [ ] Trade/technical/vocational training
- [ ] Associate degree
- [ ] Some college
- [ ] Bachelor’s degree
- [ ] Master’s degree
- [ ] Professional degree
- [ ] Doctorate degree
- [ ] Other (Specify)

25. What is your current marital status?

- [ ] Never married
- [ ] Married
- [ ] Divorced
- [ ] Widowed
- [ ] Unmarried, but living with partner
- [ ] Other (Specify)
26. **Which of the following best describes your household?** (Select one only.)
   [ ] I have one child.
   [ ] I have multiple children.
   [ ] I have no children, and do not plan for any in the future.
   [ ] I have no children, but would like to have them in the future.
   [ ] Other (please specify)____________________________________________________

27. **Please select your household’s total annual income before taxes:**
   [ ] Up to $24,999
   [ ] $25,000 to $49,999
   [ ] $50,000 to $74,999
   [ ] $75,000 to $99,999
   [ ] $100,000 or more
   [ ] Prefer not to disclose

28. **Do you know anyone that has suffered from child abuse?** (Select one only.)
   [ ] Yes
   [ ] No
   [ ] Prefer not to disclose
   [ ] Other (please specify). ____________________________________________________

29. **Do you know anyone that has utilized the services offered by the Children’s Safety Center?** (Select one only.)
   [ ] Yes
   [ ] No
   [ ] Prefer not to disclose
   [ ] Other (please specify). ____________________________________________________

30. **What is the total number of people, including children and adults, who reside in your household?**
    ___________________________________________________________________________

31. **What is your age in years as of January 1, 2017?**
    ___________________________________________________________________________
32. Is there anything else about the Children’s Safety Center you would like to share?

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Thank you for your participation.
Appendix G – Original PSA

Fight child abuse in Northwest Arkansas

Provide. Prevent. Protect.

Join the Children’s Safety Center’s new prevention programs to fight child abuse

Stewards of Children
Educates school counselors, teachers and parents on body safety education curriculum

Empower Me!
Teaches parents 5 steps to protect their children from sexual abuse

The Children’s Safety Center of Washington County empowers children to overcome abuse and begin to trust, hope and heal.
Please help. If you suspect child abuse, call the Arkansas Child Abuse Hotline at 1-800-482-5964.
Or contact us to find out other ways you can help.

479.872.6183
614 E. Emma, Suite 200 Springdale, AR 72764
www.childrenssafetycenter.org
Fight child abuse in Northwest Arkansas

Provide. Prevent. Protect.

Join new prevention programs to fight child abuse
Stewards of Children & Empower Me!

Sign up for new prevention programs at
www.childrenssafetycenter.com
or call
479.872.6183
Appendix I – Revision 2 PSA

Fight child abuse in Northwest Arkansas

Provide. Prevent. Protect.

Join new prevention programs
Stewards of Children & Empower Me!

www.childrenssafetycenter.com
479.872.6183
Appendix J – Fayetteville Farmer’s Market Application

RURAL MOUNTAIN PRODUCERS EXCHANGE, INC. dba
FAYETTEVILLE FARMERS’ MARKET
P.O. Box 3076
Fayetteville, AR 72702
To: Non Profit Applicants for the 2014 Fayetteville Farmers' Markets

On the next page is an application form for Guests at the Fayetteville Farmers’ Market
Please complete and sign the application form and mail to:
RMPE
P.O. Box 3076,
Fayetteville, AR 72702.
Applications will be accepted throughout the Market Season on the Square April - November. Your application must be printed and signed to be considered. Completed applications will be reviewed by the market coordinators and you will be contacted via email for scheduling. Due to the volume of requests we may not be able to schedule everyone for your first choice of time and so we ask that you present several date options. Also, please go to
The following is the criteria outlined for nonprofits, school groups or political candidates to table at the Fayetteville Farmers’ Market.

1) Market rules allow organizations, which are complimentary to the mission and goals of the Fayetteville Farmers Market, to host a table promoting their group once per year. Organizations may request a Tuesday, Thursday or Saturday market day. All requests will be confirmed as space is available and as market events allow.
2) Organizations may sell tickets or approved products for their fund-raising efforts, although bake sales and items that conflict with vendor sales are strictly prohibited.
3) Organizations may distribute information about their programs or events scheduled through their organization, but this information must be included in the request and the market manager must give prior written approval.
4) Organizations are required to state that they are a non-profit group, affiliation with a school, or a political candidate and must adequately promote the Fayetteville Farmers’ Market leading up to their scheduled day.

Please submit plans for advertising (to include social media), distribution of information, and list multiple dates that may work for your organization. If you are approved for tabling we WILL contact you and No fee or commission will be charged.

Mission and Goals:
RMPE started in 1973 to support local, sustainable agriculture, including small farmers, plant growers, fine artists and craft persons, by providing a marketplace for their locally produced products. The organization must be located in Washington, Carroll, Madison, or Benton counties.
2014 NON PROFIT, SCHOOL GROUP, OR POLITICAL CANDIDATE TABLING
APPLICATION
MAIL TO:
RURAL MOUNTAIN PRODUCERS EXCHANGE, INC. dba Fayetteville Farmers Market
P.O. Box 3076
Fayetteville, AR 72702

Name (Please Print) ____________________________________________________________

Phone ___________________ E-mail _______________________________________________

Street ___________________ City ________________________________________________

Zip ____________ County ______________________________________________________

Organization Name: ____________________________________________________________

1) Please provide your advertising plan along with public service announcements, social media,
advertisements, or other promotions through local news or media: (tell us how you plan to let
people know you are at market):

2) Is your organization a 501c3? _____
3) Please check the season you wish to table at market: (If there is a specific date please list it)
   ___ Spring (April-May) ___ Summer (June-Aug) ___ Fall (Sept-Dec)
4) Please list which day of week you would like to table at market
   ___ Tuesday ___ Thursday ___ Saturday ___ Sunday
How did you hear about us? ______________________________________________________

Print materials for your organization that will be handed out at the table when set up at market
are required to be included with the return of the application. Please mail all materials to
RMPE
PO Box 3076
Fayetteville, AR 72702.
Thank you!

Signature ___________________________________________ Date _________________
Appendix K – IRB Approval Form

March 15, 2017

MEMORANDUM

TO: Morgan Rhodes
    Jan Wicks

FROM: Ro Windwalker
      IRB Coordinator

RE: New Protocol Approval

IRB Protocol #: 17-02-506

Protocol Title: A Social Marketing Plan for the Children’s Safety Center

Review Type: ☑ EXEMPT ☐ EXPEDITED ☐ FULL IRB

Approved Project Period: Start Date: 03/13/2017  Expiration Date: 03/12/2018

Your protocol has been approved by the IRB. Protocols are approved for a maximum period of one year. If you wish to continue the project past the approved project period (see above), you must submit a request, using the form Continuing Review for IRB Approved Projects, prior to the expiration date. This form is available from the IRB Coordinator or on the Research Compliance website (https://vprd.uark.edu/units/irb/index.php). As a courtesy, you will be sent a reminder two months in advance of that date. However, failure to receive a reminder does not negate your obligation to make the request in sufficient time for review and approval. Federal regulations prohibit retroactive approval of continuation. Failure to receive approval to continue the project prior to the expiration date will result in Termination of the protocol approval. The IRB Coordinator can give you guidance on submission times.

This protocol has been approved for 1,948 participants. If you wish to make any modifications in the approved protocol, including enrolling more than this number, you must seek approval prior to implementing those changes. All modifications should be requested in writing (email is acceptable) and must provide sufficient detail to assess the impact of the change.

If you have questions or need any assistance from the IRB, please contact me at 109 MLKG Building, 5-2208, or irb@uark.edu.