

# Special Report on Social Determinants of Health and Emotional Well-being amid the COVID-19 Pandemic:

*Findings from the Evaluation of the How Right Now/Qué Hacer Ahora Campaign*

February 2023







## How Right Now

Special reports on the findings from the formative work and evaluation from the initial campaign launch describe the process by which audience information was gathered to inform campaign development and summarize the campaign's outcomes through May 2021. These reports are available on the [NORC website](#).

# Introduction

Since the initial COVID-19 outbreak, millions of Americans have experienced challenges to their mental health due to the loss of loved ones, economic distress, and social isolation, among other challenges. To help people cope with the mental health challenges brought on by the COVID-19 pandemic, CDC, with support from the CDC Foundation, enlisted NORC at the University of Chicago (and its partners, Burness Communications and TMN Corp) to develop *How Right Now/Qué Hacer Ahora (HRN)*. HRN is a theory-based<sup>i</sup> communications campaign that aims to address groups disproportionately affected by the pandemic.

The year 1 evaluation of HRN revealed disproportionate impacts on mental health among those who have experienced disruptions

to social determinants of health (SDOH) as a result of COVID-19. Those SDOH disruptions were highest among people who identify as African American or Black (AA/B), Hispanic or Latino (H/L), and American Indian and Alaska Native (AI/AN). These disparities are a direct result of the exclusionary policies that have left communities of color in the United States without access to resources that would help address SDOH needs (such as economic instability, housing, and food insecurity, health care, and education access and neighborhood and social environment<sup>ii,iii,iv</sup>) and put them at a higher risk for COVID-19 morbidity and mortality.<sup>v,vi,vii</sup> Therefore, the campaign evolved to focus on new audiences of focus, namely people who identify as AA/B, H/L, and AI/AN.



## About the Campaign

*HRN* offers evidence-based, audience-centric messages that reflect the real, everyday experiences and emotions that people are having and addresses them in actionable ways and visually appealing formats. Materials include an easy-to-use [website](#), where audiences can find immediate support for the emotions they are experiencing—including stress, fear, worry, grief, loneliness, sadness, and anger—and digital and printable materials that are culturally relevant. Materials are available in English and were transcreated into Spanish in partnership with Spanish-speaking health communications professionals.

To reach the communities it seeks to serve, *HRN* has leveraged trusted organizational partners and individual champions to be the voices through which these messages and materials are disseminated. Other strategies used to reach and engage the campaign's audiences include digital and social media and radio ad buys (in English and Spanish).

Since its official launch, the campaign has adapted to a shifting environment, as new COVID-19 variants emerged, to be responsive to the ever-changing needs of its audiences. Employing a mixed-method, culturally responsive design, *HRN's* evaluation has aimed to examine and assess receptivity to campaign materials and the effects of campaign exposure on individual coping and resilience. This report highlights findings from the process and outcome evaluation that covers the time period of June 1, 2021, through June 13, 2022.



## Approach to Evaluating *How Right Now/Qué Hacer Ahora*

A theory-based process and outcome evaluation was conducted to assess the campaign. The evaluation included process measures to measure the context in which the campaign was operating, how the campaign was implemented, and campaign reach. It also assessed outcome measures such as exposure, receptivity, information seeking, community engagement, and coping and resilience.

The evaluation follows steps outlined by the CDC evaluation framework<sup>viii</sup> and principles of culturally responsive evaluation (CRE).<sup>ix</sup> We triangulated findings across data sources to gain a deeper understanding of the campaign's context, implementation, reach, and impact. All evaluation activities took place in both English and Spanish. Findings are representative of the time period in which they were collected. Data collection activities are described below.



**Campaign context**



**Campaign implementation**



**Campaign reach**



**Campaign impact**

# Methods



## Environmental Scan

Searched news media and blogs using Quid Pro and reviewed **100** pieces of grey literature on COVID-19, mental health, and audiences of focus.



## Social Listening

Examined online discussions about COVID-19, mental health, and audiences of focus (**39,243** posts) and to track engagement with the *HRN/QHA* campaign (**848** posts)



## Partner Tracking

Tracked partner activities shared via email and held **5** listening sessions with partners to discuss campaign implementation and the website.



## Audience Survey

Collected nationally representative survey data from **342** respondents from our audiences of focus, with weighted sample sizes of **135** AA/B, **186** H/L and **21** AI/AN.



## Web and Ad Metrics

Examined website traffic patterns and ad performance over 12 months to understand reach and engagement of *HRN/QHA* website and materials.

## Environmental Scan

The evaluation team developed search terms and parameters on COVID-19, mental health, and the audiences of focus. We used NetBase Quid Pro to understand the context for the implementation of the campaign. The team reviewed more than 100 pieces of grey literature, including documents, articles, and opinion pieces.

## Social Listening

Applying similar terms used for the environmental scan and the campaign hashtags (#HowRightNow & #QueHacerAhora), we conducted social listening using CrowdTangle and TalkWalker to gain an understanding of the conversations that were happening across social media platforms about people's emotional experiences during COVID-19 and how audiences were engaging with campaign content.

## Partner Listening Sessions and Activity Tracking

We tracked and analyzed campaign partner activities (which included presentations, newsletters, social media platforms posts, amongst others) and all instances where partners, celebrities, and influencers shared *HRN* messages and materials. Additionally, we held listening sessions with five implementation partner organizations to discuss implementation challenges and facilitators and obtain feedback on the campaign website.

## Paid Advertising Data

Staying true to its nimble and responsive design, the campaign implemented limited digital, social, and radio advertising buys to amplify mental health promotion activities and related content (National Public Health Week during April 10-24, Mental Health Awareness Month from May 2-31 and materials tailored to American Indian and Alaska Native audiences from May 31 through June 10). Specifically, Facebook, Instagram, and Google Search ads ran in English and Spanish targeting *HRN* audiences. Finally, English and Spanish language radio ads ran on iHeartRadio between May 2, and May 29, 2022. Metrics from these ad buys were collected and analyzed as part of the evaluation.

## Google Analytics Data

We used Google Analytics metrics (e.g., the number of page views, the number of users, average session duration, resources frequently visited, user location, and how users access the site) to track and understand audience engagement with the *HRN* website during the evaluation time period.

## Audience Survey

Using AmeriSpeak® (NORC's nationally representative probability panel of more than 30,000 U.S. households), an online survey was conducted with target audience members in May 2022. The survey assessed what *HRN* messages and materials priority audiences were exposed to, audiences' thoughts about messages and materials, information-seeking behaviors, and how audiences' emotional health attitudes and coping behaviors changed with campaign exposure.



## Findings

The evaluation triangulated findings across data sources to understand the impact the campaign had on *HRN's* audiences' behaviors. Specific findings are described below.



### Campaign Context

The cultural and political climate during campaign implementation brought to light structural inequities and health disparities, as revealed by social listening data sources. As COVID-19 vaccines became more widely available in the summer of 2021, the context in which the campaign was operating shifted from the early pandemic days when the main concerns were fear about illness and isolation from lockdowns to broader structural and societal inequities. The campaign's new audiences of focus faced challenges related to SDOH and mental health, such as economic and job-related stress, barriers to health care, and increased incidence of mental health concerns. Disparities in access to care, discussions of mental health stigma, and challenges related to SDOH emerged as important contexts in social media conversations and the news.



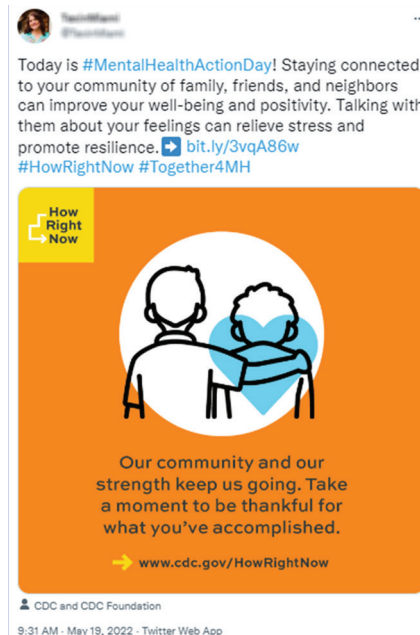
### Campaign Implementation

The campaign engaged 83 organizational partners, 44 celebrities, and 61 influencers to help promote its messages and materials. Partners used various outreach strategies and leveraged their own communication channels to reach their communities. Celebrities and online influencers, on the other hand, were provided with digital messages that were often adapted so the influencer could include a personal story.

Both paid ads as well as celebrity and influencer outreach increased the reach of the campaign and allowed for increased engagement of Spanish-speaking audiences. (See Figure 1.) Dissemination was frequently organized around coordinated "Days of Action," which allowed for coordinated moments of amplification. For example on October 15, 2020 (10-15-2020), partners, influencers and celebrities

joined together in encouraging audiences to take 10-15 minutes to care for their emotional well-being. (See Figure 2.) Targeted ad buys (on Facebook, Instagram, Reddit, Google Search, and Spanish radio) helped increase the reach of the campaign and drive traffic to the campaign website.

**Figure 1**  
CNN Post for Campaign Context



**Figure 2**  
Mental Health Action Day Post



## Campaign Reach

The *HRN* campaign reached audiences in need of support during the pandemic. During the campaign evaluation time period, the total reach for the campaign was **265,639,881**. Celebrities on social media accounted for the majority of campaign reach (see Figure 3 for example post), followed by campaign amplification activities that were supported by NORC, CDC, and the CDC Foundation; the digital and radio ads; and then partner outreach. Additional social media engagements (e.g., retweets) also substantially contributed to the campaign’s overall reach. (See Figure 4.) Compared to the last campaign evaluation, the reach decreased by only 39%, with a 60% reduction in the campaign activation period. Celebrity reach grew 66% from the last evaluation, even with fewer accounts posting, and accounted for the largest share of campaign reach.

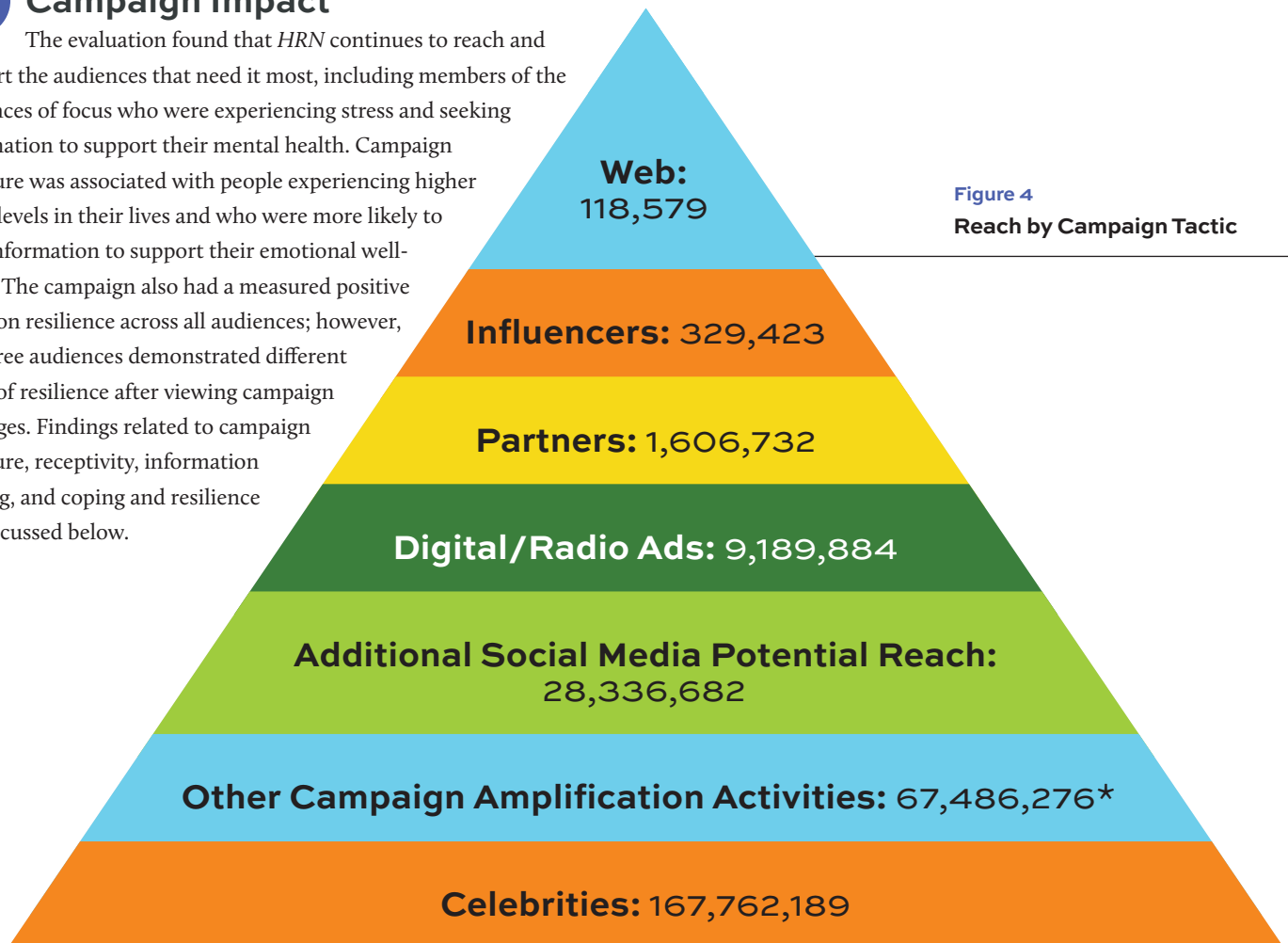


**Figure 3**  
Celebrity Mental Health Awareness Month Post



## Campaign Impact

The evaluation found that *HRN* continues to reach and support the audiences that need it most, including members of the audiences of focus who were experiencing stress and seeking information to support their mental health. Campaign exposure was associated with people experiencing higher stress levels in their lives and who were more likely to seek information to support their emotional well-being. The campaign also had a measured positive effect on resilience across all audiences; however, the three audiences demonstrated different kinds of resilience after viewing campaign messages. Findings related to campaign exposure, receptivity, information seeking, and coping and resilience are discussed below.



**Figure 4**  
Reach by Campaign Tactic

**Note on Reach Calculation:** \*Other Campaign Amplification Activities include social media and offline activities conducted by CDC, CDC Foundation, and NORC. Additional social media potential reach was calculated by summarizing each post’s and reposts’ attributed number of followers at the time of posting and subtracting the posts that could be attributed to other categories (celebrities, influencers, digital ads, and partner paid ads). This number includes Twitter retweets but does not account for any resharing or reposting across other platforms. It also does not capture temporary content from Instagram and Facebook (i.e., stories). As well, the tools used to collect the social listening data on which this calculation was performed only provide information about public and verified profiles on Facebook and Instagram, and have no access to private accounts on Facebook, Twitter, or Instagram. Therefore, very little data for accounts with smaller follower numbers are included in this calculation, especially for Instagram and Facebook accounts.



## Campaign Exposure

We found that approximately 1 in 4 individuals in our audiences of focus had been exposed to *HRN* messages or similar messages, which was consistent with the last evaluation. AA/B respondents reported the highest levels of exposure (30%), followed by AI/AN (24%) and H/L (23%); these were not statistically significant differences. Campaign exposure was significantly associated with higher levels of reported stress, as audience members exposed to the campaign had 1.9 times higher odds of reporting overall stress and 3.5 times higher odds of reporting stress and discord in the family during the pandemic than those who were not exposed. These results indicate that the campaign reached those who most needed emotional health support.

## Receptivity

Consistent with the first evaluation, the best-performing messages provided a “1-2 punch” of acknowledging emotional health needs and offering actionable suggestions to cope. Although most respondents found *HRN* messages believable and worth remembering, there were differences in the receptivity of the message between the three audiences of focus. In examining the most popular message “Take Five” (See Figure 5), AA/B audiences were more likely than others to report that the message made them more motivated to take steps to cope, H/L audiences were more likely to say the message motivated them to seek resources to take care of their emotional well being, and AI/AN respondents reported that they were less likely to be motivated to bounce back and to seek resources to take care of emotional well-being than the other audiences.

**Figure 5**  
Best Performing Messages Continued to Pack a “1-2 Punch”

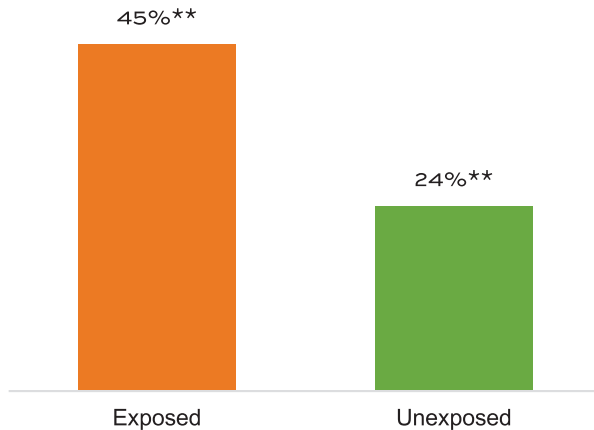


## Information Seeking

There was a strong association between campaign exposure and seeking information on resources to support emotional health. Almost half of all audience members surveyed who were exposed to the campaign reported that they tried to find information or

resources to support emotional health. (See Figure 6.) Information seeking was highest among AA/B audiences (30%) and H/L audiences (28%).

**Figure 6**  
Respondents Who Tried to Find Information or Resources to Support Their Mental Health During the Pandemic



\*\*Statistically significant differences by audience group,  $p < .05$

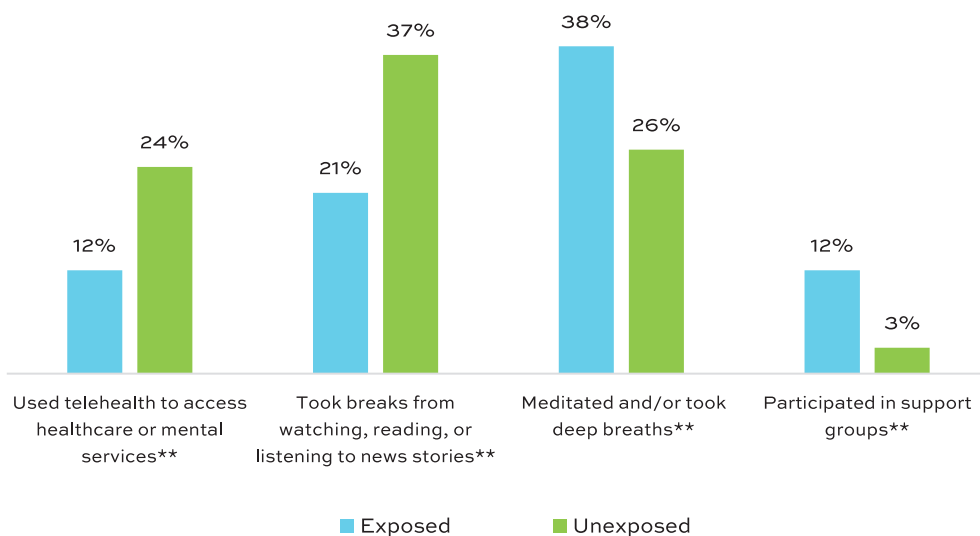
On the website, “Coping” and “Get Help” resources were the most accessed across both English and Spanish. The most popular English emotion resources related to **stress**, while the most popular Spanish emotion resource was **worry**. Resources related to **anger** were also popular across both languages. This indicates a change in the emotional health needs from the first evaluation, where the most commonly accessed resources were for grief (English) and fear (Spanish).

## Coping & Resilience

Exposure to *HRN* was associated with increased coping strategies such as participation in support groups and meditating or taking deep breaths, reflecting a few of the actions campaign messages were geared toward. Campaign exposure was also associated with audience members’ challenges related to SDOH, such as lacking health insurance and having lower levels of education. (See Figure 7.) After viewing *HRN* messages, respondents overall demonstrated a slight increase in their confidence in “coming through difficult times with little trouble” (13% increase overall). However, different audiences reported different kinds of resilience after viewing *HRN* messages; H/L audiences were most likely to report that messages increased their confidence to “bounce back quickly from these hard times,” while AA/B audiences reported increases in confidence to “snap back if something bad happens” and “get over setbacks in life.” AI/AN audiences demonstrated no changes in resilience.

**Figure 7.**  
**Audience Coping Strategies by Exposure**

Audience members who were **exposed** to the campaign were **less likely to have insurance coverage** and **less likely to have a college education or higher** than those who were **unexposed**.



\*\*Statistically significant differences by audience group, p < .05

## Conclusion

The availability of COVID-19 vaccines characterized the context for this phase of the campaign, as work, school, and life activities returned to in-person after initial lockdowns subsided. Challenges related to SDOH, including loss of income and employment, barriers to health care and education, and experiences of discrimination or structural racism, were common among our audiences of focus. *HRN's* audiences of focus demonstrated emotional health needs, information-seeking behaviors, and social determinants of health challenges. Campaign messages had the greatest impact in promoting audience members' confidence to "come through difficult times with little trouble;" however, the three audiences of focus had distinct experiences and showed different campaign impacts.

*HRN* has brought together trusted voices to provide evidence-based materials and resources to a range of audiences impacted by the COVID-19 pandemic, with particular attention paid to those groups who have been disproportionately affected. The concept of **community** emerged as an essential aspect of the campaign across audiences, as social media posts facilitated group conversation and discussion where users shared mental health coping tips and expressed gratitude and affirmations for sharing mental health struggles. Campaign activations drove engagement and created these spaces for audiences to build community with one another.

The ability of influencers and partners to tailor and adapt messages and target ads for their audiences increased the reach and impact of messages.

This evaluation of *HRN* revealed that the campaign continued to be nimble and responsive throughout the COVID-19 pandemic, **meeting its priority audiences where they were, with what they needed, when they needed it**. These adaptive techniques resulted in an increased reach of and engagement with the campaign, driving a total reach of more 265 million, even with a condensed activation period and a smaller budget for supporting paid activities. Most notable, however, was the finding that the campaign continued to have the greatest impact on those **audiences who needed it most** – providing mental health support and resources to individuals seeking out information and resources in the face of stressful times.

As the mental health impacts of COVID-19 may continue to be felt for some time, these individuals will continue to need support. Moreover, given the salience of the campaign with those experiencing other significant life stressors (e.g., financial hardship, violence, stigma, racism), the campaign has an opportunity to provide mental health and emotional well-being support well beyond COVID-19.



## About the *HRN* Team

### NORC

NORC at the University of Chicago is an objective, nonpartisan research institution that delivers reliable data and rigorous analysis to guide critical programmatic, business, and policy decisions. NORC's health communication group includes experts in digital strategy and outreach, social media data analysis, and audience research and evaluation.

### Burness

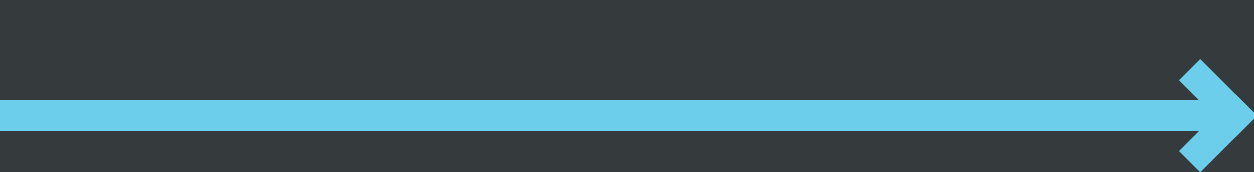
At Burness, a mission-driven organization with ability to influence social change, veteran communications, media, and policy experts work with digital strategists, designers, writers, and producers to create and execute communication strategies that move issues and elevate organizations.

### TMN

TMNcorp is a minority- and woman-owned full-service communications and marketing company that combines a broad range of media, research, and strategic management expertise not ordinarily found in a single firm. TMN's strength lies in personal and professional diversity, commitment, and desire to make a difference.

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Learn more at [CDC.gov/HowRightNow](https://www.cdc.gov/HowRightNow) or [CDC.gov/QueHacerAhora](https://www.cdc.gov/QueHacerAhora).  
For questions about the *How Right Now/Qué Hacer Ahora* campaign,  
contact [howrightnow@cdc.gov](mailto:howrightnow@cdc.gov).