

# Innovative Outreach:

## Findings from the TeenSMART Outreach Evaluation

### Introduction

A key goal of the TeenSMART Outreach (TSO) evaluation is to assess the strategies employed by TSO grantees to increase access to family planning services among adolescents. In recent years, the UCSF evaluation team has learned a great deal about the diverse outreach strategies that TSO agencies use to reach teens in their community, as well as the successes and challenges associated with implementing these strategies. Evaluation efforts have generally focused on the most frequently used outreach strategies outlined in the Office of Family Planning's Request for Applications (RFA), including informational presentations, peer-provided services, and media. Conversations with coordinators reveal that TSO agencies continuously employ new and innovative outreach strategies in efforts to reach teens in their communities.

The purpose of this set of coordinator interviews was to explore these innovative outreach strategies. Through a series of open-ended questions, coordinators were asked to describe an innovative or unique outreach strategy that their agency had recently implemented as part of its TSO efforts. Innovation was defined broadly to include both small- and large-scale efforts, one-time activities or long-term projects, and evidence-based approaches or emerging strategies. Coordinators were asked to report on a strategy regardless of whether or not they had determined it to be a "success."

This report highlights key findings from the interviews with 19 TSO coordinators\* that took place in October 2007. It includes a description of the development and implementation of innovative outreach activities by these agencies, as well as efforts to measure their impact and manage challenges. The findings from these interviews can be used to guide other programs as they implement new strategies as part of their outreach efforts. It could also be useful in the planning for the next TSO grant cycle, as these interviews provide further detail about the diverse ways in which TSO agencies successfully reach youth in their communities.

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### Types of Innovative Outreach

A review of all 19 interview transcripts revealed that the innovative strategies employed by TSO agencies fell into five categories:

1. Innovative Events (5)
2. Innovative Web Outreach (5)
3. Innovative Advertising and Promotion (5)
4. Innovative Street Outreach (2)
5. Innovative Collaborations (2)

The following sections provide detailed information on each of these categories, including the source of the innovative outreach idea, motivation for choosing a particular strategy, and successes and challenges in implementing activities and measuring impact.



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\* The Office of Family Planning (OFP) currently funds 21 TSO agencies. One agency did not participate in the coordinator interview despite multiple attempts by the evaluation team; another agency had not begun implementing TSO activities at the time of the interview.

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# Innovative Events

**F**ive TSO coordinators described unique outreach events as their innovative outreach strategy. At two agencies, these events were non-family planning related activities that TSO staff adapted to include messages about accessing reproductive health services. For example, one agency held a "Grease Sing Along" at a local movie theater [see box below]. Another sponsored movie and bowling nights for local youth at which TSO staff informed the youth about the availability of Family PACT services. Two other agencies held traditional outreach events at local schools and community settings, but focused the outreach on a specific theme or event that was relevant to the teens. For example, one agency held an outreach event at a school right before its prom, recognizing that in past years they had seen an increase in teens at their clinic during prom season. They adapted the messages to the special event by highlighting the availability of emergency contraception. Finally, one agency sponsored an annual teen clinic tour and invited local teens, community members, and school staff to informally meet clinic staff and learn about the services available.

Most (3 of 5) of the coordinators indicated that the idea for this innovative event came from peer staff or teen clients. At one agency, TSO staff presented their teen advisory group with a problem – "We felt like our message wasn't getting out there as strongly as it was in the past." The teens responded that the messages needed to be connected to something important to them; if that was the case, then word of mouth would quickly spread the idea among teens. All five coordinators felt that the motivation for choosing an outreach event was the need to reach teens in a fun, positive and new environment that was not associated with school or other required activities for the teen.

Overall, coordinators indicated that innovative outreach events had a positive impact on teens' awareness of and willingness to access clinical family planning services. By making the events fun, easily accessible, and relevant to their interests, coordinators felt that they increased the clinic's credibility with teens. As one coordinator explained, "The youth had the opportunity to meet with teen clinic staff and find [out] that they are friendly and trustworthy." The agency that hosted the open house felt that by inviting community

members, including school staff, to their event, they also increased their visibility and rapport with adults in the community.

Coordinators' impressions of impact were generally based on their own experience working at the outreach events or through word of mouth from teens or clinic staff. Several coordinators described how teens came up to them after the events to say thank you, tell them they liked the activity, and ask when it would be repeated. Coordinators also collected quantitative and qualitative data, using a variety of techniques. All of the agencies collected data on the number of teens (or adults) who attended the outreach event. Two agencies tracked teens from the outreach event to the clinic through referral cards or clinic logs, and one of these agencies noted an increase in teen clients directly following an outreach event. Another agency developed a satisfaction survey (as part of their Continuous Program Improvement evaluation requirement) to gauge teens' reactions to the outreach events, and received positive feedback. 📄

## Not your typical outreach event: A Grease sing-along

TSO staff at EOC Health Services of San Luis Obispo, Inc. wanted to give youth a positive, fun event to attend during the summer months, when TSO staff could not easily reach them through school-based activities. They rented out a local movie theater, encouraged teens to dress up in their best costume, and screened the movie Grease -- with a few twists. In addition to the costumes and singing, outreach staff incorporated health messages related to themes in the movie. For example, when a character's condom broke, outreach staff had signs and materials about emergency contraception. Anytime a character smoked, signs with anti-smoking messages were displayed. Throughout the whole event, outreach staff informed youth about Family PACT services and answered reproductive health questions. "The overall messages are essentially the same.....but this is a chance where they [teens] can ask questions in a more relaxed environment." Although it took a lot of money and staff (4 adult and 3 peer staff) to sponsor the event, the larger than expected attendance (over 200 individuals) and positive reaction from youth made the event worthwhile. For more information, please contact Francine Levin at (805) 544-2484.

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*Coordinators identified several **key elements** that led to the strategy's **success**.....*

- ⇒ Involving youth in all aspects of development and implementation
- ⇒ Having a motivated and dedicated staff
- ⇒ Connecting the outreach event to something relevant in teens' lives
- ⇒ Having community support and partnerships for the event
- ⇒ Doing lots of promotion for outreach events, including flyers, newspaper ads, and press releases

*...and mentioned **challenges** that they faced in implementing their strategy:*

- ⇒ Dealing with the logistics of planning a large event with limited resources
- ⇒ Building community partnerships and gaining school support
- ⇒ Community hesitance in participating in an event sponsored by a family planning organization
- ⇒ Getting teens motivated and actively participating in organizing the events
- ⇒ Developing and implementing evaluation

# Innovative Web Outreach

**F**ive TSO coordinators described the social networking website MySpace as their unique and innovative setting for their outreach activities.

According to coordinators, their agencies' MySpace pages typically (4 of 5) provide information about their free and confidential family planning services for teens, including contact information, directions, and hours. Three agencies also post reproductive health information, including one agency's "topic of the month." Two agencies post information on TSO-sponsored events, and one agency lists community resources for family planning.

Agencies use peer educators or young staff members who already have personal experience using the website to create their pages. These youth often use their own free time to create and maintain the site and to recruit visitors to the site, with adult staff providing content oversight. The sites typically use fun, youth-friendly photos, colors, and popular music as "a positive way to showcase the program and the clinic." Three agencies have an interactive component to their MySpace pages. On one agency's page, youth can post reviews of the clinic or outreach events which visitors to the site can read. Two agencies let youth submit reproductive health questions which are answered confidentially by a health educator.

The idea to use MySpace as a venue for outreach often came from the youth

themselves. For three agencies, it came from a young staff member or peer provider. For another agency, it was the adult staff who noticed that the teens at their youth center were always using MySpace in their computer lab, and decided to "meet the youth where they already are." Alternatively, for one agency the idea came from a presentation at a Family PACT provider forum, hosted by the Office of Family Planning.

***"Teens are on the web! We need cool, interactive websites. We're impressed how web-attached teens are, even in lower-economic areas. This will boom more than we can imagine!"***

Most coordinators (3 out of 5) said the motivation for using MySpace was that they wanted to do something that was very popular with teens, already in the forefront of teens' minds, and part of their daily routines. As one coordinator said: "This is what teens are doing. This is where they will be most frank. This is where they are talking to each other." Coordinators also mentioned that web outreach is a subtle and more private form of outreach that may be less intimidating to some youth, particularly those living in more conservative communities. As one coordinator said: "I think it provides an

avenue for kids who are too shy to ask a question during class." Another coordinator mentioned that MySpace is something many youth can access "from the privacy of their home."

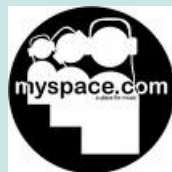
Overall, coordinators were unsure at this early stage of the impact that MySpace has on getting teens into the clinic. However, there was a strong sense that the strategy was being positively received by youth, often indicated by conversations peer providers and young staff members had with their friends. There were several ways that agencies measured the impact of their MySpace pages, including tracking the number of "hits" (number of visitors to the site) and "friends" (number of people who link to the site). One coordinator explained that there is a special meaning behind adding a person, band, or organization as your "friend" on MySpace - it shows that you support that person or organization.

Two coordinators said that tracking the number of "hits" they get is an important indicator of their success reaching new, interested web users. Another coordinator stated that the agency's "friend list" is consistently increasing, which they interpret to mean that more teens are learning about the site and find the information important. Additionally, two agencies that use sign-in sheets at their events have found that many youth hear about the events through their MySpace page. These indicators can also highlight challenges. One agency experienced a decrease in their "friends" (from over 200 to less than 100) while they were having difficulty maintaining the site and keeping information current.

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## MySpace: What's it all about?

MySpace.com is a social networking site offering an interactive, user-submitted network of friends, personal profiles, blogs, groups, photos, music and videos. By some accounts, it is the third most popular website in the United States. Anyone can set up a MySpace page, including individuals, organizations, bands, and most recently, presidential candidates. MySpace is especially popular among youth, who use it as a way to express themselves through words, images,



and music, and as a way to communicate with their friends through messages and "Friends Lists." MySpace's popularity among youth has motivated several TSO agencies to create their own MySpace pages in order to meet youth in a "place" where they already feel comfortable. To see just one example of how an agency uses MySpace as part of their TSO strategies, visit <http://www.myspace.com/operationsamahan>.

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Coordinators mentioned that because MySpace is so new, they are still coming up with ways to link its use to clinic visits. Some ideas that may be tried in the future include a printable coupon that gives teens a “front of line” pass at the clinic or a link to the agency website, where they can make an appointment online.

An important question that arose for at least one agency was whether to monitor the pages of the “friends” that link to their site. The agency was concerned that their “friends” might have inappropriate information or images on their sites, such as images of teens drinking alcohol, which in turn could affect the reputation of the agency. This issue will need to be addressed over time as agencies become more familiar with MySpace. ☞

*Coordinators identified several key elements that led to the strategy's success.....*

- ⇒ Time and effort put in by youth staff
- ⇒ Having a staff member who dedicates time each week and has the technical knowledge required to maintain the site
- ⇒ Updating the site with new content so teens don't lose interest
- ⇒ Gaining support from the agency management
- ⇒ Training and involvement from an agency's marketing department
- ⇒ Low cost, relative to other outreach efforts
- ⇒ Allocating staff time to oversee project

*...and mentioned **challenges** that they faced in implementing their strategy:*

- ⇒ Finding staff time to monitor the site for medically inaccurate information posted by visitors and to keep content current
- ⇒ Deciding how to reinforce the message to teens that MySpace is an outreach tool, not a substitute for clinic services
- ⇒ Dealing with technical challenges, and having staff with the skills to maintain the site
- ⇒ Starting a project that few other agencies have utilized, and not having a template to work from
- ⇒ Reaching teens at some schools that block use of MySpace

## Innovative Advertising and Promotion

**F**ive TSO coordinators discussed the innovative advertising and promotional techniques that they have used as part of their outreach activities. These methods included: (1) a wallet-size resource card with information about the clinic and other resources available for teens in the community, (2) an advertisement in a high school newspaper and high school football team calendar, (3) an attractive flyer with a condom taped to the back, (4) a Spanish language radio public service announcement, and (5) various promotional items such as pencils, CD cases, and safe sex kits with the clinic's information printed on them.

All five coordinators said that the idea for these strategies came out of collaborative brainstorming among their adult or peer staff. The motivation for using innovative advertising and promotion came from many different sources, such as the desire to do something new with their TSO funding,

wanting to build rapport with youth and teachers by giving something away for free, and wanting to reach out to a specific population. The idea for the Spanish PSA was also prompted by a Wells Fargo grant that sought to reach monolingual Latinos with health messages. Three agencies used teens either in the development of the advertisements and promotional items, or for giving feedback on proposed ideas. This assistance ranged from formal, such as an assignment for peer educators or feedback from a focus group,

to informal, such as asking for feedback from teens in the clinic waiting room.

While the direct impact of advertising was often difficult to assess, two coordinators had a strong sense that one of the reasons why their clinics were always full was their advertising. Other coordinators measured success in different ways.

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### Seasonal favorites: Matching the promotion to the time of year

Family Health Centers of San Diego uses seasonal promotional items to reach teens with their key outreach messages. For example, around Valentine's Day, they give out **Condom Roses** which teens can keep or give to a friend or partner. Attached to the condom roses is teen clinic information that includes location, hours of operation, and services provided; there is emphasis on confidential services. Around prom time, TSO staff make **Prom Kits** that are filled with candy, confetti, and a tag that says “Class of 20xx,” all tailored to match the colors of each high school they work with. The kits also include condoms, lubricant, clinic information, and a wallet card to bring with them to prom with resources they might need (such as crisis hotline numbers or emergency contraception information). Even though putting the kits together takes a lot of time and dedication from their staff, they feel it's worth it since the youth love the prom kits and always feel touched that the agency went to the trouble of tailoring the kits to their school's colors. For more information, please contact Denise Garcia at (619) 515-2349.



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For example, two coordinators mentioned getting verbal feedback from teens at classroom presentations and in the clinic. One coordinator said that teens in their community remember the seasonal promotional items they hand out [see box on previous page] and ask about them every year. The agency that passes out flyers with condoms taped to them mentioned that teens ask for more condoms when they receive the flyer, so they invite them to come to the clinic to get more. The agency that developed the PSA noticed that client numbers went up after it aired, especially among monolingual Spanish-speaking males. 🏠

*Coordinators identified several **key elements** that led to the strategy's **success**...*

- ⇒ Seeking out financial and in-kind support from community partners
- ⇒ Having dedicated staff to help with extra work that comes up
- ⇒ Having teacher support when advertising in schools
- ⇒ Using teens throughout the process
- ⇒ Advertising in the right location, such as near a high school
- ⇒ Making advertisements very attractive

*...and mentioned **challenges** that they faced in implementing their strategy:*

- ⇒ High cost of advertising
- ⇒ Having to obtain approval for the wording of advertisements that will appear in high schools
- ⇒ Concern about negative community or parent responses to advertisements in conservative areas

## Innovative Street Outreach

**T**wo TSO coordinators described mobile, street outreach as their innovative outreach effort. At one agency, TSO staff based at a county health department have access to a county-owned van that they use in their efforts to outreach to teens near schools and other sites where teens congregate [see box below]. TSO outreach workers staff the van, providing teens with free condoms (funded through Title X), health education, and information about clinic services.\* At another agency, TSO staff have adopted a strategy of “guerrilla outreach”, whereby they constantly change their outreach setting to reach teens at locations where they hang out after school (for example, a local Jack in the Box). At each outreach location, TSO staff establish a constant

presence by visiting the site weekly to pass out safe sex kits, wallet cards with clinic information, and incentives. TSO staff also play trivia games with the teens, in order to keep the outreach fun and exciting.

Both coordinators indicated that they were motivated to use street outreach because they realized that the best way to reach teens was to go directly to them. Although one agency is located in an urban city while the other is in a rural county, they both have found that teens respond best when the outreach is in an environment where they are familiar and comfortable. As one coordinator noted, “For some reason, teens [initially]

don’t want to go the clinic, but they all know about the van.” She also noted that mobile outreach just made sense in a “big rural county” where “we have to drive everywhere”.

Both coordinators felt that their street outreach strategies had a positive impact on teen’s awareness of family planning services and improved their willingness to go to the clinic. The van and guerilla outreach events serve to introduce youth to clinic-affiliated staff and services in a non-clinical and non-threatening environment. Although these are brief interactions, they give TSO staff the opportunity to convey the critical messages that encourage teens to access services – “family planning services are available, free [for most teens], and confidential” at a nearby clinic.

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### Reaching teens in a rural community: The condom van

TSO agencies working in rural communities face somewhat different challenges in reaching teens than those who work in urban settings. The TSO program at the Kings County Department of Public Health has access to a van (owned and maintained by the county), which outreach staff use as the “Condom Van” to travel throughout the county to provide outreach near schools.\* Along with its ability to reach significant numbers of teens and increase their comfort in accessing services [at the clinic], the agency reports that the van has also helped build relationships with local schools while respecting the fact that many community members do not support family planning services for teens. “It’s a very, very conservative community”, and TSO staff have had to find a way to reach teens while not upsetting adults. The van creates “visibility” in the community while staying “under the radar” of a vocal minority. Most importantly, the van has increased the agency’s visibility among school staff. The number of requests for presentations at local schools is proportional to how often the van is out in the community. “When we weren’t around as often, we weren’t getting calls to do school presentations.” For more information, please contact Kathy Mittleider at (559) 582-3211 x2577.



\* This van is used only for outreach activities, not clinical services. An agency may provide clinical Family PACT services in a mobile unit only if the unit is licensed to provide offsite services by the California Department of Public Health. For more information, see the Family PACT Policies, Procedures and Billing Instructions manual.

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Both agencies collect data on the number of teens that are reached through their mobile strategies. The “Condom Van” reaches 25 to 40 teens at each stop, and the guerrilla outreach events attract anywhere from 50 to 300 youth, depending on the size of the high school that they are close to. Other evidence that the strategy is effective comes from the teens themselves. Teens tell TSO staff that the guerrilla outreach events are “cool,” and staff are able to pass out popular incentives, such as lollipops with STD facts on the wrappers, in “a matter of minutes” at some events. When the van has gone out to conduct outreach for other health programs for the agency (for example, WIC or immunizations), teens asked staff for condoms, demonstrating that teens in the community recognize the van. 📄

*Coordinators identified several **key elements** that led to the strategy's success...*

- ⇒ Gaining support of their agency leadership to try different strategies
- ⇒ Having high-quality outreach staff
- ⇒ In the rural county, using word of mouth in the close-knit community to build support for the strategy

*.....and mentioned **challenges** that they faced in implementing their strategy:*

- ⇒ Retaining staff to do the outreach over an long enough period of time that allows them to build relationships in the community
- ⇒ The logistics of conducting mobile outreach, including finding the appropriate locations
- ⇒ Funding for new incentives that are popular with teens
- ⇒ Managing outreach staff burn-out. For example, “guerilla outreach” and high-volume events require a lot of staff energy

## Innovative Collaboration

**T**wo agencies described their innovative outreach as a collaboration with another youth-oriented organization in their community. At one agency, TSO staff have created a formal collaboration with a program for parenting teens at a local continuation high school. TSO staff conduct outreach at the school, provide information about available clinical family planning services, and encourage the teens to access services if needed. A week later, the agency's clinical staff visit the school in a licensed mobile clinic van to provide tailored family planning services to the young women and their partners. At another agency, TSO staff provide health-related information and support to a youth-empowerment group, the Female Leadership Academy (FLA). The young women in the group are encouraged to be a voice for young women in their community, and TSO staff provide them with information and trainings about reproductive health services to facilitate their development and leadership skills.

The idea for these collaborations came from ongoing relationships with community partners and the recognition that there was an unmet need in the community. The director of a program for parenting teens

saw many repeat teen births among young women in the program and an overall reluctance in the population to actively seek family planning services. Despite the challenges associated with providing services off site, the TSO agency felt that they needed to respond to the needs of their community. The TSO coordinator at the other agency felt like existing outreach activities were not leaving a lasting impression on youth. When the idea for the Female Leadership Academy arose as part of a series of meetings on the needs of women in the county, she felt like it was an opportunity to create sustainable change: “Everything else will disappear when the funding disappears. If we can perpetuate something within these women, it will continue forever.”

Both coordinators described the impact of these programs as positive. As a result of the relationship with the teen parenting program, TSO and clinic staff had the impression that more young women at the school kept their follow-up appointments and opened up about their reproductive health history during clinical visits. In addition, TSO staff feel like they have created a strong relationship with school staff since they listened to their concerns from the onset of the collaboration. As a

result of the FLA, the TSO coordinator feels like she has reached an extended network of teens and gained their trust as a resource for information about sex and reproductive health. She measures the impact of her work through the number of young women she trains, but also considers the social network that they will reach informally as another component of the strategy's success. 📄

*Coordinators identified several **key elements** that led to the strategy's success...*

- ⇒ Dedicated staff members who reach out to new programs and organizations
- ⇒ Support of agency leadership
- ⇒ Listening to the concerns and needs of collaborative partners

*...and mentioned **challenges** that they faced in implementing their strategy:*

- ⇒ The time required to develop and implement the program and maintain a positive collaboration
- ⇒ Working in a conservative community, specifically the concern that one individual's comments will spark a reaction
- ⇒ Scheduling meeting times

# Conclusions and Recommendations

These interviews illustrate how TSO agencies use a variety of innovative techniques to reach the teens in their communities with important messages about accessing family planning services. Their strategies range from using new outreach venues, such as the internet, to adding new twists to “tried and true” efforts, such as conducting street outreach. All the strategies included in this report share common elements, including creativity of thought, focus on the interests and needs of today’s youth, and strong dedication of program staff. TSO coordinators believe that innovation is at the heart of their outreach work and their ability to connect with teens. Most have found that their innovative strategies were among their most successful outreach approaches — indicated by positive feedback from teens, staff and the community, increased attendance at TSO-sponsored events, and perceived increased client volume in their clinics. 📖

*Coordinators identified several key elements that allowed them to be creative in their outreach efforts and make their innovative outreach ideas successful:*

**Hiring and Retaining High-Quality Staff.** The quality of adult and youth outreach staff was a crucial characteristic of successful strategies. The most successful innovative strategies had staff members behind them who had high-energy, outgoing personalities, were dedicated to the mission of the program, were willing to spend extra time on creative projects, and had the ability to connect with youth on a personal level.

**Involving Youth.** Many projects involved youth in different aspects of the innovative outreach strategies. Some strategies were designed and implemented by youth, or by a group of youth and adults in collaboration. Some agencies asked youth for formal and informal feedback as part of their creative process. Some agencies used youth to spread the word about a particular outreach technique. Many coordinators said that involving youth was the most important component in making their strategies a success.

## Making a Connection with Teens’ Lives.

Coordinators often noted the importance of tailoring outreach strategies to the lives of teens. As one coordinator noted, *“If we don’t stay creative we’re going to lose teens. They respond to unique and creative activities.”* Whether this was by using technology that teens are already familiar with, such as

MySpace, or by aligning outreach efforts with salient events in teens’ lives, such as the prom, this connection was very significant, and usually very successful in reaching teens with key prevention messages and clinical referrals.

## Gaining Support from Important Stakeholders.

Most coordinators mentioned at least one key stakeholder which helped to make their strategy a success. Sometimes these stakeholders were from within the agency, such as upper-level management that was supportive of the staff’s need to use important time and resources to implement the strategy. Sometimes the stakeholders came from outside the agency, such as support from teachers, school personnel, and other community agencies that defended the projects in the context of a conservative political climate.

**Securing Necessary Funding.** Most agencies noted that funding was a critical determinant of whether they were able to be creative and successful. For some, OFP was their primary funding source for outreach; others combined these funds with grants from private foundations, schools and community partners. Some agencies managed to leverage small amounts of funding by making smart decisions about how money should be spent or asking for discounts. Some agencies felt challenged by limited funding and felt their strategies would have been more successful if funded at higher levels.

*The following recommendations emerged for agencies looking to develop innovative outreach efforts:*

- ◆ *Involve youth in developing outreach activities through advisory boards, informal meetings, suggestion boxes, or focus groups*
- ◆ *Encourage staff to improve knowledge and skills regarding new web-based technologies*
- ◆ *Work with clinic staff to assess and improve the teen-friendliness of the clinic setting*
- ◆ *Seek out new partnerships with local businesses, foundations, and schools to support innovative efforts*
- ◆ *Connect outreach activities to issues and events that are salient in teens’ lives (e.g., holidays, movies, prom, graduation)*
- ◆ *Collect and share evaluation findings about your innovative outreach activities*
- ◆ *Share your agency’s innovative experiences with others!*