Boise State University

ScholarWorks

Idaho Policy Institute Reports

Idaho Policy Institute

1-1-2023

Idaho Department of Health and Welfare Fentanyl Awareness Campaign Evaluation 2023

Benjamin Larsen
Boise State University

Matthew May Boise State University

Ellen Schafer
Boise State University

Mcallister Hall
Boise State University

Aisha Kayed Boise State University

See next page for additional authors

This report was prepared by Idaho Policy Institute at Boise State University and commissioned by Idaho Department of Health and Welfare.

This publication was made possible by 6NU17CE925017-03-02 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Department or the Centers for Disease Control and Prevention, Health and Human Services. Idaho Department of Health and Welfare, 2023.

Authors Benjamin Larsen, Matthew May, Ellen Schafer, Mcallister Hall, Aisha Kayed, and Emma Redman



IDAHO DEPARTMENT OF HEALTH AND WELFARE
FENTANYL AWARENESS CAMPAIGN EVALUATION
2023





FENTANYL AWARENESS CAMPAIGN **EXECUTIVE SUMMARY**

The Idaho Department of Health and Welfare's (IDHW) Drug Overdose Prevention Program (DOPP) partnered with Boise State University's Idaho Policy Institute (IPI) to conduct an evaluation of the fentanyl awareness campaign that took place from June 2022 to December 2022. The primary goals of the campaign were to increase awareness of risks associated with cross-contamination of drugs with fentanyl and increase use of overdose reversing medication. To evaluate the fentanyl awareness campaign's reach and effectiveness, IPI conducted a statewide survey that is representative of Idaho's population. The survey included questions about perceptions of the magnitude of illegal substance use in Idaho, general knowledge related to fentanyl use, familiarity with the fentanyl awareness campaign, and overall impressions of the campaign materials. Key takeaways from this technical report include:

- Idahoans are largely aware that fentanyl overdose is a critical problem and a majority have knowledge of the drug, but fewer know details about treatments such as naloxone.
- The fentanyl awareness campaign reached approximately 14.0% of Idahoans.
- Online and social media advertisements were the most common places respondents saw the fentanyl awareness campaign materials.
- When asked about the fentanyl awareness campaign's effectiveness, 73.5% of Idahoans said the campaign was at least a little effective.
- Approximately 11.3% of Idahoans report using drugs not prescribed by a health care provider and 31.8% of Idahoans say they have friends or family that do so.
- Respondents who saw the fentanyl awareness campaign materials reported significantly higher rates of seeking information and treatment about substance use.



Cover Photo Credit: Photo by Hal Gatewood, Unsplash.com Executive Summary Photo Credit: Photo by Alexander Grey, Unsplash.com

INTRODUCTION

The Idaho Department of Health and Welfare's (IDHW) Drug Overdose Prevention Program (DOPP) aims to reduce overdose death and promote opioid use disorder treatment within the state. In 2022, DOPP developed a media campaign to raise awareness of the risks of illicitly manufactured fentanyl among Idahoans, specifically people who use drugs (PWUD) and their families. The fentanyl awareness campaign had three goals:

- 1. Increase awareness of cross-contamination of drugs with illicitly manufactured fentanyl,
- 2. Increase knowledge of illicitly manufactured fentanyl and its risks, and
- 3. Increase use of harm reduction strategies such as naloxone.

The fentanyl awareness campaign utilized Centers for Disease Control and Prevention (CDC) marketing materials to communicate the high risk of fatal overdose when ingesting illicit drugs due to the increased presence of fentanyl within Idaho's illicit drug supply. The campaign prioritized PWUD, especially recreational drug users, as well as their families and friends. In addition, the campaign emphasized the following counties: Bannock, Bear Lake, Benewah, Butte, Canyon, Clark, Gem, Kootenai, Shoshone, Teton, and Valley Counties. The goals of this evaluation are to determine the reach of the fentanyl awareness campaign, assess preferred dissemination tactics, measure knowledge surrounding fentanyl, and measure the rates of drug use in Idaho.

Fentanyl awareness campaign materials were disseminated through social media, digital display and video, paid search, and out-of-home advertising via posters and jukebox ads in bars. The campaign dissemination occurred in three rounds, first from June 2022-August 2022, second from August 2022-October 2022, and third from October 2022-December 2022. Figure 1 contains an example of the fentanyl awareness campaign materials, which was also shown to survey respondents while completing their response.

FIGURE 1: EXAMPLE OF FENTANYL AWARENESS CAMPAIGN MATERIALS



METHODOLOGY

Idaho Policy Institute (IPI) developed a survey to assess the reach and effectiveness of DOPP's fentanyl awareness campaign (Glasgow et al 1999). Reach is "the percent and representativeness of individuals willing to participate" in the campaign, meaning the number and characteristics of people who indicated they saw the campaign materials (Glasgow et al 2006, p. 688). Effectiveness is "the impact of the intervention on targeted outcomes and quality of life" (Glasgow et al 2006, p. 688). In this report, effectiveness is measured through differences in individual behavior among those that report seeing the campaign materials versus those that didn't see the materials, as well as asking all respondents their impressions of the campaign materials.

A survey of 400 Idaho adults was conducted from June 1-7, 2023. The random sample is representative of the state's population with a margin of error of +/- 4.9%. The survey included questions about perceptions of the magnitude of illegal substance use in Idaho, general knowledge related to fentanyl use, familiarity with DOPP's media campaign, and overall impressions of the campaign materials. Respondents could choose to take the survey in either English (99.5%) or Spanish (0.5%). GS Strategy Group fielded the survey on behalf of IPI using a mixed-mode approach of text message (48.8%) and online (51.3%) distribution. These methods of distribution were selected in order to ensure fentanyl awareness campaign materials were embedded within the survey instrument.

There are two limitations to this research to note while considering the results. First, this survey does not measure changes in individuals' behavior because it was not accompanied by a pre-test of a similar population. These results only reflect the respondents' knowledge, attitudes, and behaviors at the time of the survey. Second, there were other fentanyl related marketing campaigns conducted statewide between the time the fentanyl awareness campaign was disseminated and the time of the survey. Other marketing campaigns could have influenced respondents' knowledge, attitudes, and behaviors.

The survey is representative of Idaho's population both geographically and demographically. The geographic representation is based on county populations. Demographic representation includes age, gender, race, and Hispanic or Latino origin. For complete results of the statewide survey demographic breakdown, see appendix A.

In addition to the base statewide sample, IPI collected an additional 206 responses from residents of the 11 Idaho counties that were prioritized by DOPP's fentanyl awareness campaign, including Bannock, Bear Lake, Benewah, Butte, Canyon, Clark, Gem, Kootenai, Shoshone, Teton, and Valley Counties. By combining this oversample with the responses collected as part of the base survey, IPI is able to analyze a pool of 319 responses from priority counties in order to assess the reach of DOPP's fentanyl awareness campaign in priority counties compared to the state as a whole.

Between the base survey sample and the oversample of priority counties, a total of 606 responses were collected for analysis. Throughout the report, mostly the base statewide sample (n=400) is used, but the oversample is used for the appropriate sections. It is noted in the text when the oversample data is used for analysis. While much of IPI's analysis is framed to identify knowledge levels and impacts on the state of Idaho as a whole, we note that our subsequent model analysis is more oriented on the general factors that contribute to drug-use, seeking assistance, and engaging with IDHW resources. The analysis includes mostly descriptive statistics and crosstabulations of the data. Logistic regression was used to explore potential relationships between demographic characteristics and respondents' indicated behaviors or perceptions.

SURVEY RESULTS

IDAHO RESIDENT AWARENESS OF ILLICITLY MANUFACTURED FENTANYL

In the statewide sample, most survey respondents believe illegal drug use in Idaho is a problem (78.3%) with slightly more respondents aged 18-34 feeling this is a problem than those 55 and older (83.9% compared to 76.2%). Figure 2 shows the counties covered by each of Idaho's seven public health districts. As shown in Table 1, a large majority of respondents from the Southeastern Idaho Public Health district reported illegal drug use as a big problem, with 88.9% total reporting it as a problem. The same percentage of respondents from Eastern Idaho Public Health district also indicated illegal drug use is a problem in Idaho. Only 65.9% of respondents from the South Central Public Health District region feel illegal drug use is a problem, which was the lowest among health districts.

Approximately 68.8% of Idahoans feel they are familiar with fentanyl in general, this familiarity with fentanyl is about the same across all age groups. As shown in Table 1, Southeastern Idaho Public Health district had the most respondents familiar with the substance (84.4%) and Panhandle Health District had the least (54.2%).

FIGURE 2: MAP OF IDAHO'S PUBLIC HEALTH DISTRICTS

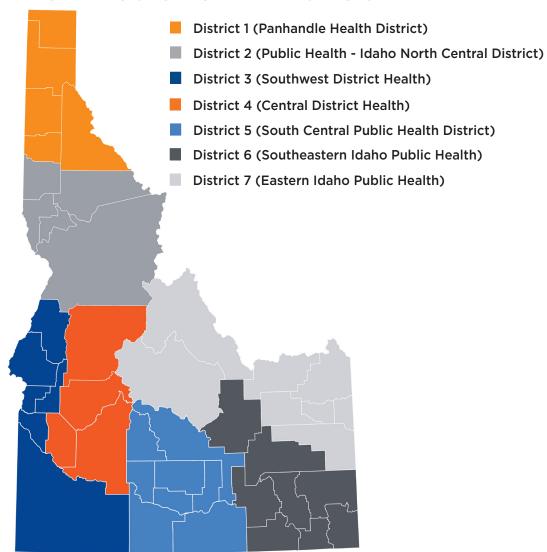


TABLE 1: PERCENT OF RESPONDENTS WHO SAY DRUGS ARE A PROBLEM AND ARE AWARE OF FENTANYL BY PUBLIC HEALTH DISTRICT

Public Health District	Drugs are a problem in Idaho	Familiar with fentanyl
Panhandle Health District (n=48)	36 (75.0%)	26 (54.2%)
Public Health - Idaho North Central District (n=32)	27 (84.4%)	21 (65.6%)
Southwest District Health (n=54)	43 (79.6%)	34 (63.0%)
Central District Health (n=132)	98 (74.2%)	92 (69.7%)
South Central Public Health District (n=44)	40 (88.9%)	38 (84.4%)
Southeastern Idaho Public Health (n=45)	40 (88.9%)	38 (84.4%)
Eastern Idaho Public Health (n=45)	40 (88.9%)	33 (73.3%)

Figure 3 shows the counties that are covered by each of the four media markets in Idaho (note that Bear Lake, Franklin, and Oneida Counties are in the Salt Lake media market but due to a small sample size, those responses are combined with the Idaho Falls media market). Table 2 shows a breakdown of questions related to familiarity with fentanyl issues by the media market (MM). The Idaho Falls MM had the highest percent of respondents both thinking drugs are a problem and being familiar with fentanyl. Whereas, the Twin Falls MM had the lowest rate of thinking drugs are a problem and the Spokane MM had the lowest rate of fentanyl familiarity.

FIGURE 3: MAP OF IDAHO'S MEDIA MARKETS

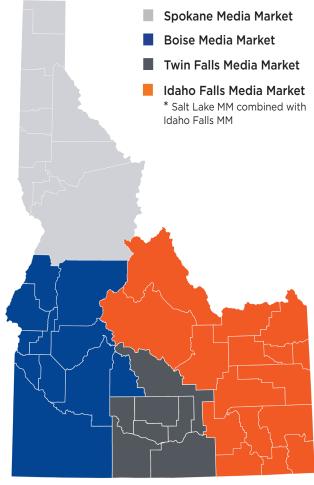


TABLE 2: PERCENT OF RESPONDENTS WHO SAY DRUGS ARE A PROBLEM AND ARE AWARE OF FENTANYL BY MEDIA MARKET

Media Market (MM)	Drugs are a problem in Idaho	Familiar with fentanyl
Boise MM (n=186)	141 (75.8%)	126 (67.7%)
Idaho Falls MM^ (n=90)	80 (93.0%)	71 (78.9%)
Spokane MM (n=80)	63 (78.8%)	47 (58.8%)
Twin Falls MM (n=44)	29 (65.9%)	31 (70.5%)

[^] Salt Lake MM combined with Idaho Falls MM (n=4)

Survey respondents were asked a series of knowledge questions regarding fentanyl. Only 21.8% of respondents were able to answer all six knowledge questions correctly, on average, respondents got about four questions correct. Respondents from Southeastern Idaho Public Health district on average answered five questions correctly. As shown in Table 3, the question answered correctly by most people was if the United States is undergoing a drug overdose surge led by synthetic opioids such as fentanyl, 87.8% of respondents knew this was true. The question answered correctly by the fewest people was if one dose of naloxone, an overdose reversal drug, reverses a fentanyl overdose every time, only 40.7% of respondents knew this was false. The percent of people who were unsure about the answers is considerable, ranging from 10.7% of respondents unsure about the United States' drug overdose surge to nearly half of respondents unsure about one dose of naloxone reversing an overdose every time.

TABLE 3: STATEWIDE SAMPLE KNOWLEDGE OF FENTANYL (N=400)

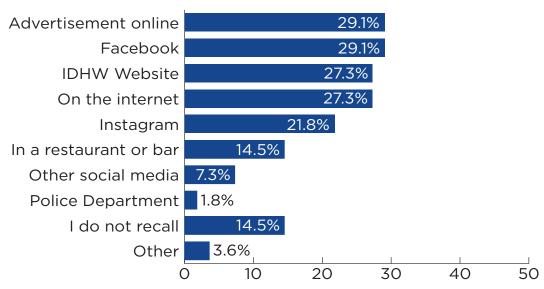
Statement	True	False	Unsure
Fentanyl is used to treat pain.	235 (58.8%)	46 (11.5%)	119 (29.7%)
Fake prescription pills can contain deadly amounts of fentanyl.	338 (84.5%)	15 (3.7%)	47 (11.8%)
There are legal, doctor prescribed uses for fentanyl.	252 (63.0%)	40 (10.0%)	108 (27.0%)
It is very easy to tell if a substance contains fentanyl.	14 (3.5%)	308 (77.0%)	78 (19.5%)
One dose of naloxone, an overdose reversal drug, reverses a fentanyl overdose every time.	49 (12.3%)	163 (40.7%)	188 (47.0%)
The United States is undergoing a drug overdose surge led by synthetic opioids such as fentanyl.	351 (87.8%)	6 (1.5%)	43 (10.7%)

[^] Correct answers are noted in orange

IDAHO RESIDENTS EXPOSED TO THE FENTANYL AWARENESS CAMPAIGN

In the statewide sample, 56 respondents (14.0%) had seen the campaign materials. The most common places respondents had seen the materials were on Facebook (28.6%), somewhere on the internet (26.8%), and in a restaurant or bar (14.3%), as shown in Figure 4. A few respondents indicated seeing the ads on TV, Instagram, and other social media sites. Some respondents could not recall where they saw the campaign materials.

FIGURE 4: WHERE DID RESPONDENTS SEE THE MATERIALS (N=56)^



[^] Respondents could select more than one option

As shown in Table 4, the Southeastern Idaho Public Health district and South Central Public Health District had the highest rate of respondents who saw the fentanyl awareness campaign materials, while Panhandle Health District had the lowest. Central District Health and Southwest District Health had the highest rate of respondents who were unsure if they'd seen the campaign materials.

TABLE 4: RESPONDENTS WHO SAW THE CAMPAIGN MATERIALS BY PUBLIC HEALTH DISTRICT

Public Health District	Yes	No	Unsure
Panhandle Health District (n=48)	3 (6.2%)	43 (89.6%)	2 (4.2%)
Public Health - Idaho North Central District (n=32)	4 (12.5%)	27 (84.4%)	1 (3.1%)
Southwest District Health (n=54)	8 (14.8%)	42 (77.8%)	4 (7.4%)
Central District Health (n=132)	13 (9.8%)	109 (82.6%)	10 (7.6%)
South Central Public Health District (n=44)	11 (25.0%)	33 (75.0%)	0 (0.0%)
Southeastern Idaho Public Health (n=45)	12 (26.7%)	33 (73.3%)	0 (0.0%)
Eastern Idaho Public Health (n=45)	5 (11.1%)	39 (86.7%)	1 (2.2%)

As shown in Table 5, there were only minor differences in how many respondents saw the campaign materials across media markets. Most of these respondents lived within the Boise MM. Although, only 11.3% of respondents living in the Boise MM had seen the materials. The Twin Falls MM had the highest percentage of respondents seeing the materials (25.0%).

TABLE 5: RESPONDENTS WHO SAW THE CAMPAIGN MATERIALS BY MEDIA MARKET

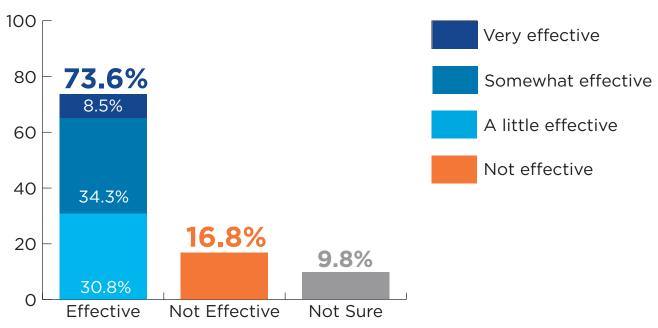
Media Market (MM)	Yes	No	Unsure
Boise MM (n=186)	21 (11.3%)	151 (81.2%)	14 (7.5%)
Idaho Falls MM^ (n=90)	17 (18.9%)	72 (80.0%)	1 (1.1%)
Spokane MM (n=80)	7 (8.8%)	70 (87.5%)	3 (3.7%)
Twin Falls MM (n=44)	11 (25.0%)	33 (75.0%)	0 (0.0%)

[^] Salt Lake MM combined with Idaho Falls MM (n=4)

CAMPAIGN EFFECTIVENESS: IMPRESSION OF THE FENTANYL AWARENESS CAMPAIGN MATERIALS

All of the respondents were shown the campaign materials during the survey in order to measure the effectiveness of the fentanyl awareness campaign materials. Figure 5 shows a breakdown of responses about the overall effectiveness of the fentanyl awareness campaign materials. When asked about the campaign's effectiveness, 73.5% of respondents said the campaign was at least a little effective.

FIGURE 5: EFFECTIVENESS OF FENTANYL AWARENESS CAMPAIGN MATERIALS (N=400)



In the statewide sample, most respondents believed the message (67.8%). Hispanic respondents and those who say drugs are a problem are more likely to have believed the message. Only 39.8% said the campaign materials taught them something new. Hispanic respondents, those who say drugs are a problem, and those that sought treatment for substance use are more likely to say they learned something new. The younger age range (18-34) had the largest rate of respondents feeling the materials were effective (80.6%) and that the materials taught them something new (49.5%).

Approximately 58.8% of Idahoans thought the materials were effective in grabbing their attention while 32.3% actually related to the materials. This somewhat aligns with a later question where 31.8% of respondents reported having a friend or family member who uses drugs that are not prescribed. About half of respondents 55 or older thought the materials grabbed their attention, compared to 66.9% of 35-54 year olds. Similar rates of each age group related to the content. Those with an income of \$45,000 or less, those who say drugs are a problem, those that sought treatment for substance use, and those that sought information about naloxone and fentanyl were more likely to say they could relate to the content.

KNOWLEDGE AND AWARENESS OF RISKS ASSOCIATED WITH ILLICITLY MANUFACTURED FENTANYL

The survey asked a series of questions about actions respondents have taken in the past year and the results are displayed in Table 6. These actions involve the respondents either seeking to increase their own knowledge and awareness of fentanyl or raising awareness in others. In the statewide sample, 34.0% of respondents had told a friend or family member about the risks of fentanyl. This rate was about the same across age groups and media markets. However, there were some differences across public health districts with the Panhandle Health District having the lowest rate (25.0%) and Southeastern Idaho Public Health district having the highest (51.1%) of telling friends or family about the risks of fentanyl.

TABLE 6: PERCENT OF RESPONDENTS TAKING ACTION IN THE PAST YEAR (N=400)

Action taken	Percent
I told a friend or family member about the risks of fentanyl.	136 (34.0%)
I sought treatment for substance use.	16 (4.0%)
I sought more information about using naloxone to reverse a fentanyl overdose.	44 (11.0%)
I asked my health care provider about the risks of fentanyl.	18 (4.5%)
I visited the IDHW website.	82 (20.5%)
I searched the internet for more information on fentanyl.	66 (16.5%)

When asked about seeking information about naloxone, 11.0% of respondents indicated they actively sought more information about its use to reverse a fentanyl overdose. Of respondents aged 18 to 34 years old, 19.4% indicated they had sought information about naloxone use to reverse a fentanyl overdose, representing the highest rate of all age groups. In public health districts, Idaho North Central District represented the highest rate of seeking information about naloxone (18.8%).

Table 7 includes information about the people who took the actions mentioned above that relate to the goals of the fentanyl awareness campaign. They are separated by those who saw the campaign materials and those who did not. In each instance, respondents that saw the campaign materials were statistically significantly more likely to take the actions listed in Table 7 than those who did not see the campaign materials. Chi-square significance tests had a p-values of p < .001 for each of the relationships listed in Table 7. There is a strong correlation between seeing the fentanyl awareness campaign materials and taking the actions that align with the goals of the campaign. Respondents who saw the fentanyl awareness campaign materials reported significantly higher rates of seeking treatment and information about substance use.

TABLE 7: PERCENT OF RESPONDENTS TAKING EACH ACTION BY WHETHER RESPONDENT SAW THE CAMPAIGN MATERIALS

Action taken	Percent seeing materials (n=56)	Percent not seeing materials (n=344)
I told a friend or family member about the risks of fentanyl.	36 (64.3%)	96 (27.9%)
I sought treatment for substance use.	9 (16.1%)	7 (2.0%)
I sought more information about using naloxone to reverse a fentanyl overdose.	20 (35.7%)	24 (7.0%)
I asked my health care provider about the risks of fentanyl.	11 (19.6%)	7 (2.0%)
I visited the IDHW website.	24 (42.9%)	55 (16.0%)
I searched the internet for more information on fentanyl.	22 (39.3%)	42 (12.2%)

In the statewide sample, respondents were asked if they had asked their health care provider about the risks of fentanyl, only 4.5% indicated they had. The Southeastern Idaho Public Health district had the highest rate of those who had asked a health care provider about the risks of fentanyl (11.1%), while the Eastern Idaho Public Health district and Southwest District Health had the lowest (0.0%), as shown in Table 8. The rate within age groups and media markets was the same as seen in Table 9.

TABLE 8: PERCENT OF RESPONDENTS WHO ASKED THEIR HEALTH CARE PROVIDER ABOUT FENTANYL BY PUBLIC HEALTH DISTRICT

Public Health District	Yes	No
Panhandle Health District (n=48)	5 (10.4%)	43 (89.6%)
Public Health - Idaho North Central District (n=32)	3 (9.4%)	29 (90.6%)
Southwest District Health (n=54)	0 (0.0%)	54 (100.0%)
Central District Health (n=132)	4 (3.0%)	128 (97.0%)
South Central Public Health District (n=44)	1 (2.3%)	43 (97.7%)
Southeastern Idaho Public Health (n=45)	5 (11.1%)	40 (88.9%)
Eastern Idaho Public Health (n=45)	0 (0.0%)	45 (100.0%)

TABLE 9: PERCENT OF RESPONDENTS WHO ASKED THEIR HEALTH CARE PROVIDER ABOUT FENTANYL BY MEDIA MARKET

Media Market (MM)	Yes	No
Boise MM (n=186)	4 (2.2%)	182 (97.8%)
Idaho Falls MM [^] (n=90)	5 (5.6%)	85 (94.4%)
Spokane MM (n=80)	8 (10.0%)	72 (90.0%)
Twin Falls MM (n=44)	1 (2.3%)	43 (97.7%)

[^] Salt Lake MM combined with Idaho Falls MM (n=4)

In the statewide survey, 20.5% of respondents indicated they had visited the IDHW website. This rate differed among age groups, public health districts, and media markets. Those aged 18-34 years had the highest rate of visiting the IDHW website (44.1%). Idahoans living with a disability were more likely to say they visited the IDHW website. Eastern Idaho Public Health district had the highest rate (26.7%) while Southwest District Health had the lowest rate (16.7%). Similarly, in media markets, the Idaho Falls MM had the highest rate of respondents indicating they had visited the IDHW website (24.4%).

Few respondents (16.5%) indicated they had searched the internet for more information regarding fentanyl. This rate was about the same across age groups, but differed across public health districts and media markets. Those with higher levels of education and those who have friends or family who use drugs were more likely to have searched for information about fentanyl. As displayed in Table 10, in public health districts across Idaho, South Central Public Health District had the highest rate of respondents indicating they had searched the internet for more information on fentanyl (25.0%) while Southwest District Health had the lowest (5.6%). Similarly, across media markets, Twin Falls MM had the highest rate (25.0%). Respondents in the Idaho Falls MM and Twin Falls MM had higher rates of searching the internet for fentanyl information than those in other public health districts.

TABLE 10: RESPONDENTS WHO SEARCHED FOR INFORMATION ABOUT FENTANYL BY PUBLIC HEALTH DISTRICT

Public Health District	Yes	No
Panhandle Health District (n=48)	11 (22.9%)	37 (77.1%)
Public Health - Idaho North Central District (n=32)	6 (18.8%)	26 (81.2%)
Southwest District Health (n=54)	3 (5.6%)	51 (94.4%)
Central District Health (n=132)	20 (15.2%)	112 (84.8%)
South Central Public Health District (n=44)	11 (25.0%)	33 (75.0%)
Southeastern Idaho Public Health (n=45)	11 (24.4%)	34 (75.6%)
Eastern Idaho Public Health (n=45)	4 (8.9%)	41 (91.1%)

LIKELIHOOD OF OBTAINING AND USING ILLICIT SUBSTANCES

The survey did not ask specifically if the materials impacted substance use but did ask about substance use and if respondents had sought treatment in the past 12 months. Statewide, 45 respondents (11.3%) reported using drugs not prescribed to them by a health care provider. In the priority counties, 11.0% of respondents reported substance use, nearly the same as the statewide rate. Statewide, 18 (4.5%) reported frequently using drugs not prescribed to them, while 17 (4.3%) reported occasionally using drugs and 10 (2.5%) reported rarely using drugs. Statewide, 31.8% of Idahoans say they have friends or family who use drugs not prescribed by a health care provider. Statewide, 68 (17.0%) reported frequent drug use of family and friends, while 50 (12.5%) reported occasional drug use and 7 (1.8%) reported rare use.

Younger respondents aged 18-34 were more likely to report drug use (18.3%), compared to those 35-54 (11.9%) and those over 55 (7.4%). No demographic group was significantly more likely to report substance use, except LGBTQ people. Nearly half of LGBTQ respondents reported using drugs not prescribed by a health care provider (46.7%), but only 20.0% report frequent use. LGBTQ respondents account for 31.1% of all respondents reporting the use of substances. These findings suggest that LGBTQ people are highly vulnerable to substance use disorder and more marketing and resources directed at LGBTQ people could be critical to the health of this community. Those with family or friends who use drugs were significantly more likely to report using drugs not prescribed by a health care provider.

As shown in Table 11, there is not much variation between public health districts on respondents reporting substance use. The Eastern Idaho Public Health district has the lowest rate at 4.4%, while the South Central Public Health District has the highest at 15.9%.

TABLE 11: RESPONDENTS REPORTING DRUG USE BY PUBLIC HEALTH DISTRICT

Public Health District	Percent reporting substance use
Panhandle Health District (n=48)	6 (12.5%)
Public Health - Idaho North Central District (n=32)	3 (9.4%)
Southwest District Health (n=54)	6 (11.1%)
Central District Health (n=132)	15 (11.4%)
South Central Public Health District (n=44)	7 (15.9%)
Southeastern Idaho Public Health (n=45)	6 (13.3%)
Eastern Idaho Public Health (n=45)	2 (4.4%)

As shown in Table 12, there is not much variation between media markets on respondents reporting substance use. The Idaho Falls MM has the lowest rate at 8.9%, while the Twin Falls MM has the highest at 15.9%. In both the public health district and media market results, respondents' substance use was more prevalent in South Central Idaho, but slightly less in Eastern Idaho.

TABLE 12: RESPONDENTS REPORTING DRUG USE BY MEDIA MARKET

Media Market (MM)	Percent reporting substance use			
Boise MM (n=186)	21 (11.3%)			
Idaho Falls MM^ (n=90)	8 (8.9%)			
Spokane MM (n=80)	9 (11.3%)			
Twin Falls MM (n=44)	7 (15.9%)			

[^] Salt Lake MM combined with Idaho Falls MM (n=4)

Eight respondents (2.0%) reported using drugs and having sought treatment for substance use in the last year. These eight respondents were fairly evenly split between those who use drugs rarely, occasionally, and frequently. Eight respondents (2.0%) reported seeking treatment in the past year but did not report using drugs, this could mean the treatment was successful or they chose not to report any drug use. Most of the respondents who sought treatment were in the 18-34 age range (43.8%). Only 18.8% were 55 or older, and 37.5% were 35-54 years old. The Boise MM and Spokane MM had the highest rates of those seeking treatment at 37.5%, while 25.0% of respondents in the Idaho Falls MM sought treatment. Table 13 shows the percent of respondents who reported substance use seeking treatment by public health district, though not all public health districts were represented.

TABLE 13: PERCENT OF RESPONDENTS WHO REPORTED SUBSTANCE USE SEEKING TREATMENT BY PUBLIC HEALTH DISTRICT (N=16)

Public Health District	Percent reporting substance use
Panhandle Health District	2 (12.5%)
Public Health - Idaho North Central District	4 (25.0%)
Southwest District Health	0 (0.0%)
Central District Health	6 (37.5%)
South Central Public Health District	0 (0.0%)
Southeastern Idaho Public Health	2 (12.5%)
Eastern Idaho Public Health	2 (12.5%)

EVALUATION OF CAMPAIGN MATERIAL RESONANCE WITH PRIORITY POPULATIONS

The campaign materials aimed to reach three priority populations of Idahoans, those aged 18-34, PWUD, and residents in Shoshone, Valley, Gem, Butte, Clark, Bannock, Bear Lake, Teton, Kootenai, Benewah, and Canyon counties. The age 18-34 group had the highest rate of seeing the campaign materials (23.7%), compared to the rates of those aged 35-54 (13.6%) and those over 55 (9.5%). When looking at the unique responses from the combination of the statewide sample and the oversample, the county with the most respondents who had seen the campaign materials was Bannock County (23.2%). As shown in Table 14, both Kootenai and Canyon County were targeted with extra campaign materials and only 11.8% and 14.9% had seen the materials before the survey.

TABLE 14: RESPONDENTS WHO SAW THE CAMPAIGN MATERIALS BY PRIORITY COUNTY

County	Yes	No	Unsure
Bannock County (n=56)	13 (23.2%)	38 (67.9%)	5 (8.9%)
Bear Lake County (n=6)	0 (0.0%)	6 (100.0%)	0 (0.0%)
Benewah County (n=2)	0 (0.0%)	2 (100.%)	0 (0.0%)
Butte County (n=0)	_	-	-
Canyon County (n=121)	18 (14.9%)	96 (79.3%)	7 (5.8%)
Clark County (n=0)	_	-	-
Gem County (n=10)	0 (0.0%)	10 (100.0%)	0 (0.0%)
Kootenai County (n=110)	13 (11.8%)	93 (84.5%)	4 (3.6%)
Shoshone County (n=4)	0 (0.0%)	4 (100.0%)	0 (0.0%)
Teton County (n=4)	0 (0.0%)	4 (100.0%)	0 (0.0%)
Valley County (n=6)	0 (0.0%)	4 (66.7%)	2 (33.3%)
Statewide (n=400)	56 (14.0%)	326 (81.5%)	18 (4.5%)

In the oversample population, 101 (31.7%) respondents reported having friends or family members who use drugs not prescribed by a health care provider, almost the same as the statewide rate. These respondents did not have a notable difference in the rate of responses compared to respondents who do not have friends and family members who use drugs for the questions analyzed in this section. In the oversample responses, 35

(11.0%) respondents reported using drugs that are not prescribed to them by a health care provider, nearly the same as the statewide rate.

A somewhat higher rate of these respondents reported having seen the campaign materials prior to the survey compared to those not reporting drug use, as displayed in Table 15. All respondents were shown the campaign materials during the survey and were asked a series of questions about them. Similar rates of PWUD and people not reporting drug use feel the materials are effective at increasing their knowledge about fentanyl, but there was some difference between those that have family or friends with drug use and those that do not.

TABLE 15: FENTANYL AWARENESS CAMPAIGN REACH AND EFFECTIVENESS BY REPORTED SUBSTANCE USE

Reported drug use	Had seen campaign materials	Believed materials were effective		
Respondents who use drugs (n=45)	11 (24.4%)	32 (71.1%)		
Respondents not reporting drug use (n=355)	45 (12.7%)	262 (73.8%)		
Respondents who know PWUD				
Respondents who have friends or family that use drugs (n=127)	15 (11.8%)	102 (80.3%)		
Respondents who do not have friends or family that use drugs (n=273)	41 (15.0%)	192 (70.3%)		

When asked if the campaign materials taught them something new, PWUD had somewhat higher rates of agreement than respondents not reporting drug use, as shown in Table 16.

TABLE 16: CAMPAIGN MATERIALS TAUGHT SOMETHING NEW BY RATE OF SUBSTANCE USE

Reported drug use	Campaign materials taught respondents something new
People not reporting drug use (n=355)	138 (38.9%)
PWUD (n=45)	21 (46.7%)
PWUD rarely (n=10)	5 (50.0%)
PWUD occasionally (n=17)	9 (52.9%)
PWUD frequently (n=18)	7 (38.9%)

PWUD did tend to relate to the materials more often than those who do not, with 51.1% of PWUD agreeing they related to the materials compared to 29.9% of those who do not use drugs. Those using drugs occasionally had a higher rate relating to the materials (58.8%) compared to those using frequently (50.0%) and rarely (40.0%). Respondents who have friends or family who use drugs had similar rates of relating to the materials as PWUD (45.7%).

When asked if they believe the message of the campaign materials, 73.3% of PWUD agreed compared to 67.0% of respondents not reporting drug use and 74.8% of respondents who know PWUD. PWUD occasionally had the highest rate of agreeing that they believed the message (88.2%), followed by PWUD frequently (72.2%), while only half of PWUD rarely believed the message (50.0%).

INCREASED CLICK-THROUGH-RATE TO THE DEPARTMENT'S FENTANYL INFORMATION WEBSITE

The DOPP's fentanyl awareness campaign dissemination occurred in three phases, first from June 2022-August 2022, second from August 2022-October 2022, and third from October 2022-December 2022. The campaign directed web-traffic to the IDHW website, Fentanyl, the primary landing page for the DOPP initiative, but this page linked to several other websites related to the subject matter, including About Opioids, Overdose Prevention, and Overdose Response. According to IDHW web analytics, from January 2022 through July 2023, the Fentanyl landing page was viewed 9,463 times. Some related pages saw significantly more traffic, with About Opioids receiving 35,166 page views during the same time period and Overdose Response receiving 25,375 page views. The page Overdose Prevention only received 1,085 views during this time period.

Of these page views, 4,420 (46.7%) occurred during the time the campaign was active for the Fentanyl landing page. Alternatively, 32,205 (91.6% of page views for the About Opioids page occurred during the campaign, 18,109 (71.4%) for the Overdose Response page, and 440 (40.6%) for the Overdose Prevention webpage.

From this data, we can determine that the fentanyl awareness campaign was successful in substantially increasing the click-through-rate to the Department's Overdose Response webpage, but saw smaller increases to the other pages. The campaign did increase the average number of daily page views: while the campaign was inactive, collectively the four webpages averaged 13 page views a day. Conversely, while the campaign was active the webpage averaged 78 page views a day, a 511.0% increase in web traffic. Figure 6 summarizes page views by date for the four webpages, with reference lines to note when the campaign began and when it ended. Table 17 summarizes page views by month.

FIGURE 6: FENTANYL AWARENESS CAMPAIGN PAGE VIEWS JANUARY 2022 TO JULY 2023

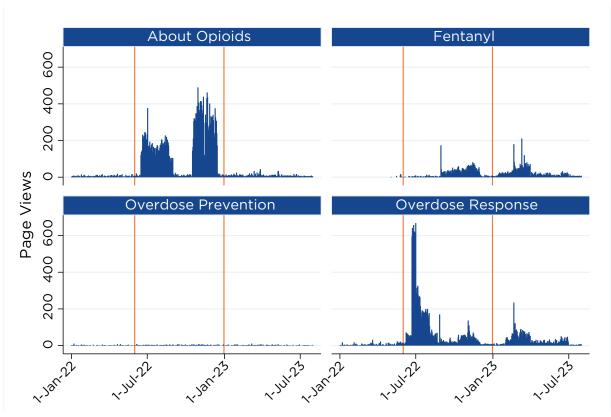


TABLE 17: FENTANYL AWARENESS CAMPAIGN PAGE VIEWS BY MONTH

Year	January	February	March	April	Мау	June	July	August	September	October	November	December
About Opioids Webpage												
2022	160	138	210	214	160	3,027	5,100	4,888	271	4,908	9,746	4,536
2023	295	224	407	231	290	210	151	-	-	-	-	-
				Fe	ntanyl \	Webpag	е					
2022	-	-	-	-	48	68	118	342	853	1,205	1,652	182
2023	434	1,073	1,990	469	392	456	181	_	-	_	_	_
			C	verdos	e Preve	ntion W	ebpage					
2022	60	27	40	46	37	64	62	77	65	78	102	57
2023	57	49	89	57	51	33	34	-	-	-	-	-
Overdose Response Webpage												
2022	92	123	213	185	296	6,376	7,023	1,839	560	1,182	1,485	204
2023	200	1,722	1,888	558	533	780	116	-	-	-	-	-

CONCLUSION

This evaluation analyzed the reach and effectiveness of DOPP's fentanyl awareness campaign disseminated from June 2022-December 2022. IPI analyzed a statewide survey that included a representative sample of Idahoans. The survey asked respondents about illegal substance use in Idaho, knowledge of fentanyl use, familiarity with the fentanyl awareness campaign, and overall impressions of the campaign materials. The survey results will be used to strengthen future campaigns aimed at increasing awareness of the risks of fentanyl and treatment options. The fentanyl awareness campaign reached approximately 14.0% of Idahoans and 73.5% of Idahoans said the campaign was at least a little effective. Respondents who saw the campaign materials were more likely to seek information about substance use. Since about 11.3% of Idahoans report using drugs and 31.8% say they have friends or family that do, future campaigns should continue to disseminate campaign materials about the risks of fentanyl overdose and treatment options, particularly in regions of Idaho with higher rates of illicit substance use or less knowledge of fentanyl.

REFERENCES

- Allen, B., Sisson, L., Dolatshahi, J., Blachman-Forshay, J., Hurley, A., and Paone, D. (2020). Delivering opioid overdose prevention in bars and nightclubs: A public awareness pilot in New York City. Journal of Public Health Management and Practice, 23(3): 232-235.
- CDC National Center for Injury Prevention and Control. Evaluation profile for implementing an overdose communication campaign. https://www.cdc.gov/drugoverdose/od2a/evaluation.html
- Fernandez, P., Azucar, D., and Zambole, K. (2023). A dose of truth: A qualitative assessment of reactions to messages about fentanyl for people who use drugs. Substance Use and Misuse, 58(4): 520-527.
- Glasgow, R., Klesges, L., Dzewaltowski, D., Estabrooks, P., and Vogt, T. (2006). Evaluating the impact of health promotion programs: Using the RE-AIM framework to form summary measures for decision making involving complex issues. Health Education Research, 21(5): 688-694.
- Glasgow, R., Lichtenstein, E., and Marcus, A. (2003). Why don't we see more translation of health promotion research to practice? Rethinking the efficacy-to-effectiveness transition. American Journal of Public Health, 93(8): 1261-1267.
- Glasgow, R., Vogt, T., and Boles, S. (1999). Evaluating the public health impact of health promotion interventions: The RE-AIM framework. American Journal of Public Health, 89(4): 1322-1327.
- Potter, A., Jardine, A., Morrissey, A., and Lindsay, M. (2019). Evaluation of a health communication campaign to improve mosquito awareness and prevention practices in Western Australia. Frontiers in Public Health, 7: 1-11.

APPENDIX A

The following figures display the demographic characteristics of the statewide survey respondents. Demographic questions asked on the survey include age group, Hispanic or Latino origin, race, gender identity, LGBTQ+ identity, employment status, household size, disability status, veteran status, education level, income, and whether English is the respondent's native language. All figures in Appendix A have a sample size of 400.

FIGURE 1A: RESPONDENTS BY AGE

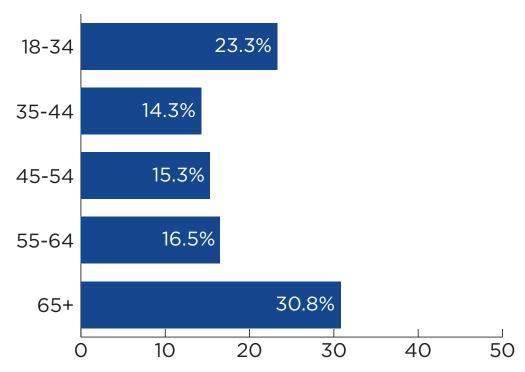


FIGURE 2A: RESPONDENTS BY HISPANIC OR LATINO ORIGIN

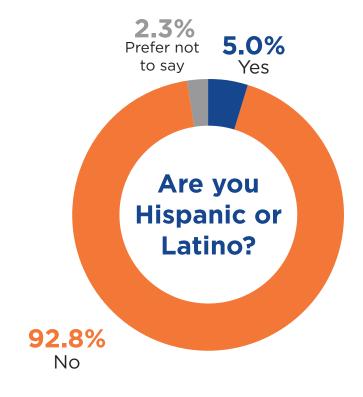


FIGURE 3A: RESPONDENTS BY RACE

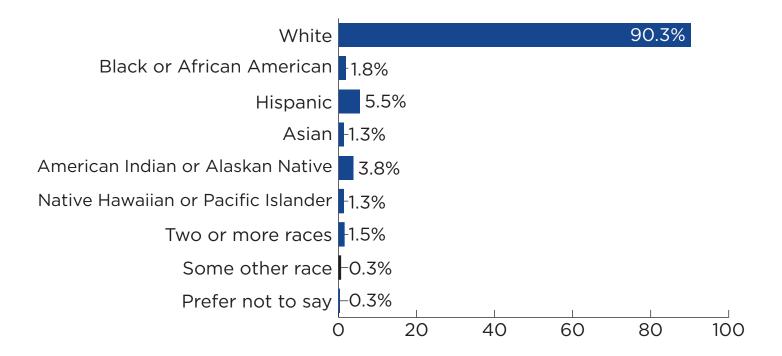


FIGURE 4A: RESPONDENTS BY GENDER IDENTITY

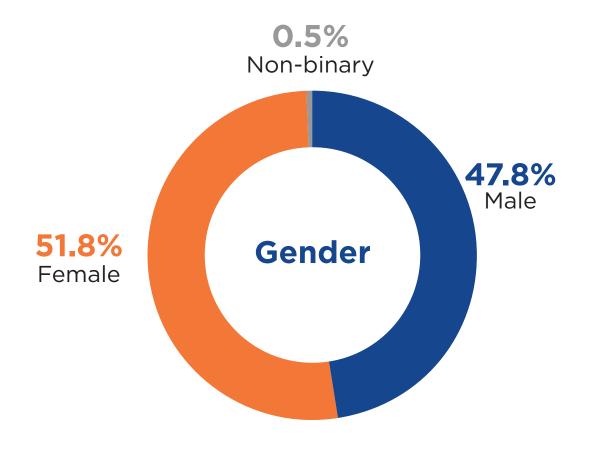


FIGURE 5A: RESPONDENTS BY LGBTQ+ IDENTITY

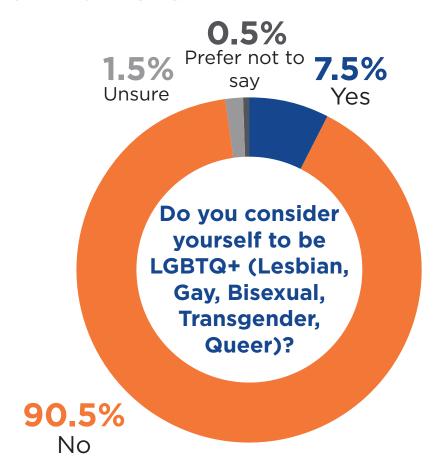


FIGURE 6A: RESPONDENTS BY EMPLOYMENT STATUS

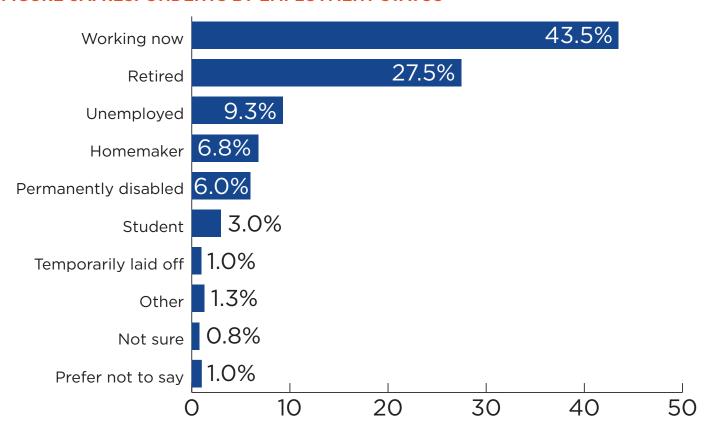


FIGURE 7A: RESPONDENTS BY HOUSEHOLD SIZE

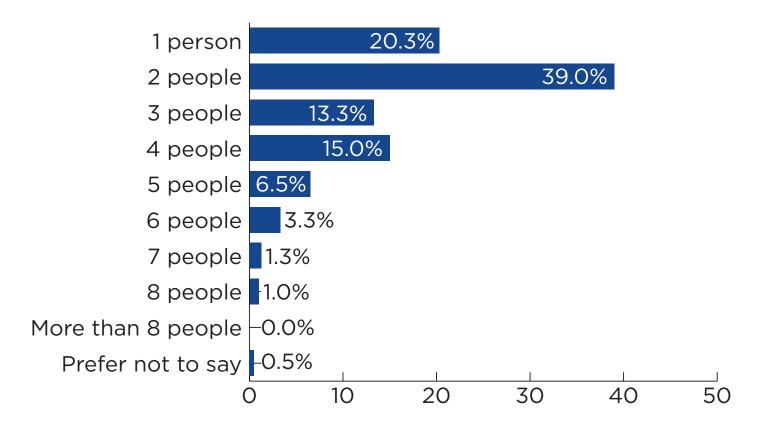


FIGURE 8A: RESPONDENTS BY DISABILITY STATUS

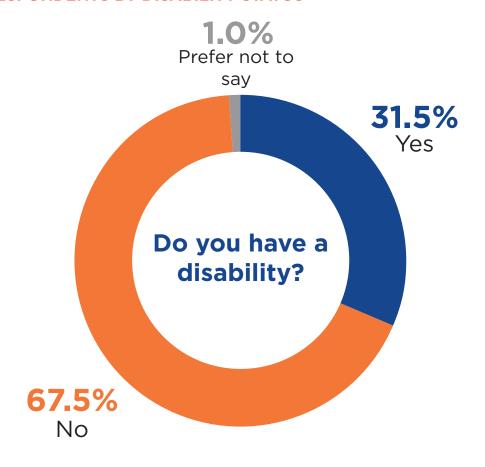


FIGURE 9A: RESPONDENTS BY VETERAN STATUS

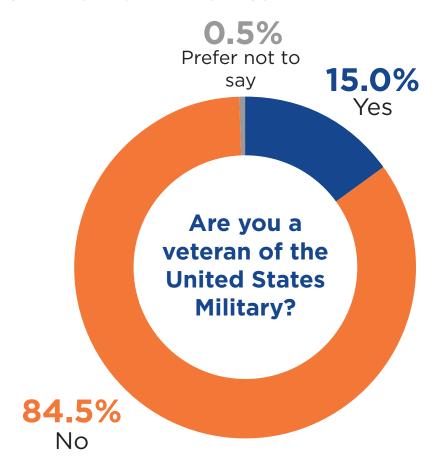


FIGURE 10A: RESPONDENTS BY EDUCATION LEVEL

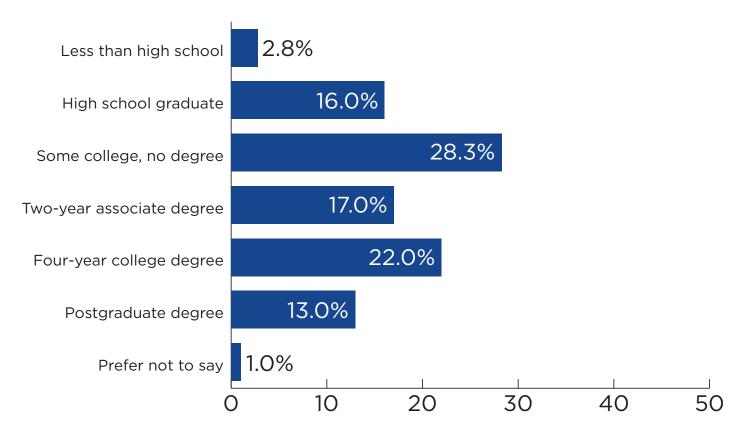


FIGURE 11A: RESPONDENTS BY INCOME

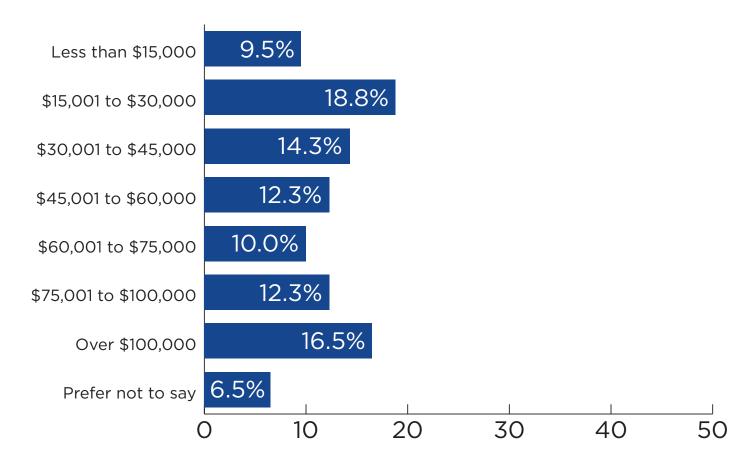


FIGURE 12A: RESPONDENTS BY ENGLISH AS THEIR NATIVE LANGUAGE



FIGURE 13A: RESPONDENTS BY PUBLIC HEALTH DISTRICT

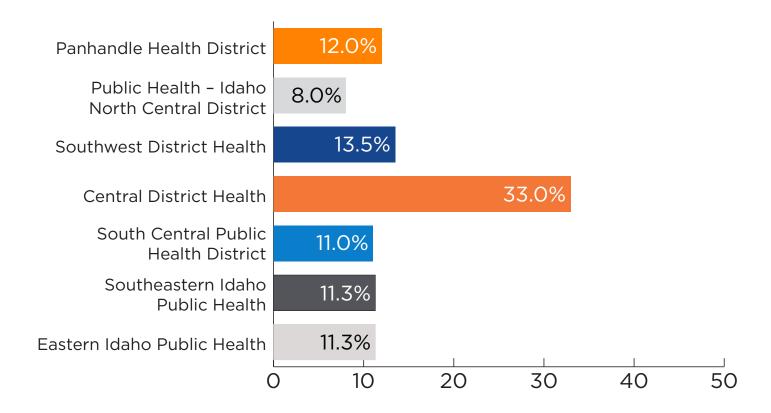
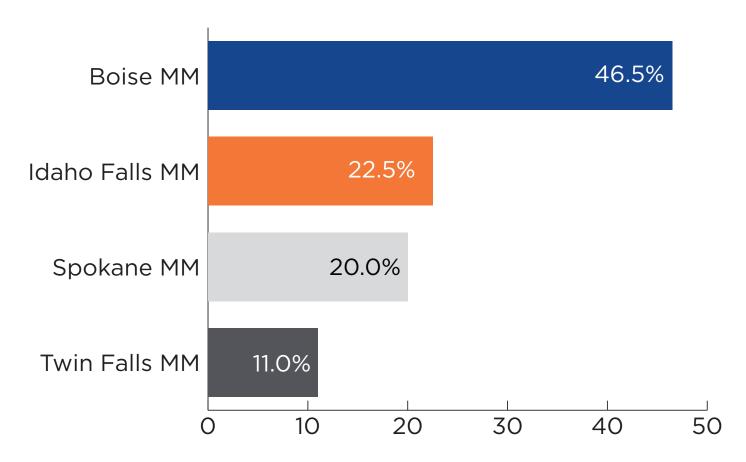


FIGURE 14A: RESPONDENTS BY MEDIA MARKET



This report was prepared by Idaho Policy Institute at Boise State University and commissioned by Idaho Department of Health and Welfare.

This publication was made possible by 6NU17CE925017-03-02 from the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Department or the Centers for Disease Control and Prevention, Health and Human Services. Idaho Department of Health and Welfare, 2023.

boisestate.edu/sps-ipi/

REPORT AUTHORS

BENJAMIN LARSEN, PHD MATTHEW MAY, PHD ELLEN SCHAFER, PHD MCALLISTER HALL AISHA KAYED EMMA REDMAN

