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

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

Behavioral Model: Awareness/Reinforcement at Point of Behavior, Repetition

Social Norming through training & “testing” Engineering & Enforcement where possible

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

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

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

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**Parents of Children headed to camp**
- Inundated with info, busy,
- Care about children,
- Smattering info sources (FB, Instagram, only some see local news
- Opinion leaders imprt. e.g. docs., schools, friends

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

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