

Campaign Proposal

No One Stuck Behind (N1SB)

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Goal

Use existing technologies and Net-Gen grassroots individuals to create an outreach campaign for education, awareness, and re-examining current thoughts on addiction along with how those lifestyles are led by those who suffer from it.

Analysis of Current Media / Educational Outreach Strategies:

Approaching this as a conventional news piece that would go out to deter youth away from drug usage with fear would bring nothing new to the table. If anything, the older approaches to drug abuse education could alienate the most important of audiences: The Net-Gen. It becomes harder and harder to deny the connectivity potential that appears when recognizing that a majority of people continue to receive better mobile technologies. Results of this shift on viewers, activists, and consumers has been incalculable. Fundamentally, consumers have different expectations on how content is created, disseminated, and most importantly followed through by the community. Social activism based in the digital realm has a higher propensity for activation when founded on empathy and connectivity between audience and narrative.

Proposed Strategy: No One Stuck Behind

Spontaneous Productions proposes a Tristate initiative with flexible scaling capabilities to potentially help other epidemic stricken areas. **No One Stuck Behind**, focuses on three primary areas of engagement:

- •The honest truths of addiction,
- ·Connectivity between citizens through empathy,
- •Boots-on-ground grassroots individual activation.

Stuck: Isolation and Addiction: The proposed flagship media series of the campaign.

The outreach and educational components will focus on: honest real information about how addiction can occur, potential treatment options, the holistic effect of epidemic levels of drug use on community values, financial strain on governments and medical resources, and ultimately its increasing body count.

A series of short documentaries from the lives of addicts on vine street to the hills of suburban Kentucky, there is no area that is "off-limits" to Heroin which makes general outreach the cornerstone. From wealthy suburbia to the inner city, Stuck will provide the avenue for all audiences who know or are passionate about deterring this health epidemic. Hoping to cover all aspects is a challenge but the primary chapters will be dedicated to: rehab institutions, law enforcement, street level addiction, middle/upper class usage, Nurses, Doctors, users, Survivors, and Those Left Behind (as in a family or friend has departed due to an overdose or drug abuse).





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Unstuck - The Social Movement

Complimenting this ever-evolving comprehensive series on the various realities of drug abuse, Stay Connected, would be a section of our dedicated web-site used to upload videos of those who may be alone today. Effectively, social engagement is triggered in two parts: empathy and ease of action. Utilizing the fact that basically all people with a phone have a video camera or still camera, Stay Connected focuses on offering an alternative to providing something like a dollar to an individual struggling or flat out ignoring them as seems the be the cultural normative in cities like ours unfortunately.

Offering a free simple way to engage with the displaced population in Cincinnati, Spontaneous Productions would hope that a stronger understanding of the depth and scale of addiction reaches everyone in some shape or form. This unique avenue also allows for a cork-board capability for users to engage in their own ideas, groups, and hopefully help in better local coordination. Without a strong city, willing to bond together, spread love, and help others in a literal way, addiction will only continue to grow. By fighting back against isolationism, segregation, and stigmas associated with some of our sickest community members, we could at least begin to build a foundation of hope for those stuck behind in a life of addiction.

Community Partnerships and Outreach

Under the identity of Connecting Cincinnati, this area on the site would focus on any and every institution, health care provider, community leaders, business, that could assist those "still stuck." A meta-page that could bring a variety of services, traditionally separated in digital locations, into a single space. Compiling all the most relevant and available resources in a single place would make prevention, and recovery an easier process to complete.





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Scope + Scale Goal:

For the degree of the opioid discussion, prevention tactics, and outreach of this public-health epidemic, a single focus has taken the center-stage: non-medical opioid pain reliever usage. At first glance, there seems little wrong with course correcting those who abuse the medicine of others or their own supply. What happens in the long-term is that the holistic problem loses is clarity. Resources and policy can be maneuvered to provide increasingly better yet still ephemeral treatment to OD victims, but we still live in a period of re-action to our problem of addiction.*

Re-focusing the narrative away from short-scale (yet still worthwhile for innumerable reasons) "band-aid" like tactics to a more permanent long-form process. While a majority of story relevance has focused on the fear based approach to opioid addiction's spread across the tristate, we still have residents of this great city overdosing multiple times on the same day.** While intervention treatments in regards to overdosing have had seen leaps and bounds in improvement, the drug markets seem to be matching pace. For as many noxolone shots that save the life of someone over-dosing, it remains no more than treating the symptoms of a illness without properly treating the illness itself.

Three primary tactics can be interpreted throughout this first phase of pushing back the tides of addiction: reconnection, rebuilding, and fundamentally rehabilitation.

While Alliteration is catchy, that is not why the previously mentioned tactics have been chosen as the primary tenants to focus addiction prevention and treatment around. In totality all three: reconnection between citizens in a empathetic methodology, rebuilding a network of city wide support that, if not is immediately available to assist, is a tool to be used by all in regards to beginning the work of the final tenant; rehabilita-

Funding

To try and implement a series of video's in concert with collaborations between health focused organizations and our "postcard" network between citizens and those who are on the streets should take approximately 4 months of filming. A following 2 months of post-productions should be expected with a final month for exporting the media.

A total of 6 months would accrue before the first video can be produced, after it should only take that final month to finalize the other 4 videos totaling somewhere between 4 and 5 1/2 months of continual filming and editing.

To accomplish this while keeping the lights on Spontaneous Productions is hoping to cultivate a series of local collaborative funding, private sponsorships, local and state opportunities for partnership, and finally grant based funding.

^{*}The Prescription Opioid and Heroin Crisis: A Public Health Approach to an Epidemic of Addiction; Annual Review of Public Health; Vol.36:559-574 (Volume publication date March 2015); First published online as a Review in Advance on January 12, 2015; DOI: 10.1146/annurev-publhealth-031914-122957

^{*}Interim Health Commissioner Dr. Marilyn Crumpton, http://www.wcpo.com/news/cincinnati-saw-fewer-heroin-over-dose-deaths-in-2016-than-2015, Joe Rosemeyer; 3:03 PM, Jan 24, 2017