

Chapter 1 : Public Health Campaigns That Change Minds - Blog

This chapter focuses on diversity issues associated with large-scale public health communication campaigns. These campaigns include federal government-supported programs such as the National High Blood Pressure Education Program and the National Youth Anti-Drug Media Campaign; the state-sponsored.

November 08, by MPH GW Staff In order to compete in this increasingly competitive and complex environment, those of us in public health must make the science and art of communication as integral a part of our everyday activities as the science of epidemiology and disease control. Persuade a community to vaccinate their children? Incentivize a whole nation to eat better? These types of questions are at the heart of every health communication campaign, which aim to change how people think about their health and simultaneously provide them with the resources and incentives to improve it. Health communication professionals who spearhead these projects play a powerful role in curbing harmful behaviors and promoting good ones among at-risk communities and individuals. Ingredients for a Successful Public Health Campaign In *Essentials of Public Health Communication*, Claudia Parvanta outlines how health communication campaigns are constructed with the ecological model in mind. That approach takes into account not just physiological health variables, but also social and cultural factors that influence health on a variety of levels. These include individual behavior and physiology; family, community and social networks; living and working circumstances; and state, national and global conditions. The size and reach of a campaign depends on the scope of the problem being addressed. Campaigns that seek to change behavior on a national scale, for instance, need to address more ecological levels than ones working to address a public health problem specific to a particular city or town. So how is a successful communications campaign put into motion? Planning Parvanta describes the process as a wheel that is in constant motion. Before anything else, campaign leaders need to determine whether there is sufficient evidence to suggest that a health problem definitively exists within a certain population. If so, they then need to determine if interventions have been conducted in the past and, if so, whether they were successful. In addition, they must identify whether those strategies can be improved or adapted in the current intervention. Development The development phase of a campaign helps identify its objectives and the desired behavior changes or attitudes leaders hope to effect among the target population. Understanding why a harmful behavior or attitude exists is crucial to reversing it. Evaluation Evaluating whether a campaign has actually succeeded in changing behavior is a rigorous but crucial part of any intervention initiative. In addition, continued funding and support for many campaigns can depend heavily on whether it has been demonstrably effective. The challenge lies in not only measuring the reach of a campaign, but also determining whether the messaging results in the desired and intended behavior change. Summative evaluations tend to occur at the end of an operating cycle. Findings from this type of evaluation identify the outcome or impact of the program, and are used to decide whether a program should be adopted, continued or modified for improvement. Proper evaluation and the right combination of tools, says Patrick Remington, author of *Communicating Public Health Information Effectively*, is key to initiating sustainable behavior change. Public health professionals must understand their audiences and the environments in which they operate; this is a key tenet of successful health communication. Case Studies How do these processes work in practice? In this digital age, health communication and social marketing are finding new and more creative ways to encourage long-lasting behavior changes that result in better health. Following are two examples of U. The campaign became a household name during the early s for its unyielding illustration of tobacco-related harm. The cowboy now must rely on an electronic voicebox to sing and speak. Several studies found that the original pilot campaign in Florida reduced the likelihood that youths would continue to smoke later in life or start smoking at all. Another study found that the vast majority of youth in the state ages could recognize at least one of the campaign advertisements. A study in the March issue of the *American Journal of Public Health* found the campaign led to declines in teen smoking rates nationwide. Substance abuse and suicide among men Year Founded: The initiative “a multifaceted, web-based resource that features a fictional character named Rich Mahogany” uses humor to reach its target audiences. In addition to

humorous videos, the site features resources that allow men to learn more about their mental health, such as an online support group. Visitors can also send resources and cards to men they may know who are struggling. We thought humor would really crack that stigma and draw men in. To better understand the effectiveness of the campaign, implementers of Man Therapy evaluated its outcomes using three strategies: Close to 60, point head inspections were completed. The pop-up survey found that 83 percent of visitors would recommend the site to a friend in need, and 51 percent agreed or strongly agreed that they were more likely to seek help after visiting the site. Pursuing a Career in Health Communication As chronic and infectious “but preventable” diseases continue to threaten public health in the 21st century, the need for targeted, nuanced health communication will remain high. Interventions that consider social and cultural determinants of health have the ability to improve wellness for individuals and large communities alike. Professionals in this field can build careers in a variety of environments, from private firms and insurance companies, to large government agencies and nonprofits. Are you considering a career in this field?

Chapter 2 : What is Health Communications? | Gateway to Health Communication | CDC

Campaigns are often a component of broader social marketing programs. Social marketing is the application of commercial marketing ideas to help solve social and health problems (Andreasen,).

Page 82 Share Cite Suggested Citation: The National Academies Press. In the following sections, we discuss the definition of a campaign, the various approaches campaigns have used to address diversity, and specific evidence about diversity effects. The concluding section offers recommendations. Communication campaigns can be differentiated from focused educational interventions that work entirely through clinical or other in-place institutions as well as those that are delivered individually to people. Our focus is on a subset of campaigns that have large target audiences for example, the entire population of a state or country. Yet even programs that fit into this category are quite different from one another. Some characteristics that are typical, although not always present, are the following: Communication campaigns intend to provide direct education for those people who are expected to adopt or change to a healthier behavior. Campaigns seek to affect large audiences and bring substantial resources to the task sometimes monetary, sometimes voluntary, sometimes through collaboration with other institutions. Campaigns often use multiple channels, and may complement mediated television, radio channels with personal channels health professionals, outreach workers. Campaigns often are sponsored by the government, sometimes in collaboration with private advocacy or professional organizations, or by national advocacy or professional organizations alone. Campaigns are often a component of broader social marketing programs. Social marketing is the application of commercial marketing ideas to help solve social and health problems Andreasen, Social marketing programs complement communication efforts with other intervention components. For example, a social marketing campaign to encourage childhood vaccination might complement a public communication effort to promote vaccination uptake with a subsidy in the price of vaccines and an easier system for obtaining vaccines, or even a change in the rules about what vaccines can be given together. Even more broadly, many campaigns complement efforts to directly influence populations with efforts to affect public policy taxes, regulation as well as to change other aspects of the environment and the marketplace, including changes in the ways that other social institutions act. These complementary efforts would be expected to influence populations indirectly. These multilevel social change programs might include grassroots organizing, political and media advocacy, partnerships with private institutions, and the design and offering of new products. They recognize the importance of system and environmental constraints that support or impede the desired behavior changes. Throughout the 20th century, communication campaigns were developed to address most major public health issues, including a broad array of behavioral outcomes ranging from the initiation and maintenance of preventive health behaviors to the cessation of behaviors that increase the risk of negative health outcomes. For example, health communication campaigns were developed to reduce smoking; promote compliance with high blood pressure treatment and childhood and adult vaccination schedules; promote safer Page 84 Share Cite Suggested Citation: It incorporates many elements typical of long-lived campaigns. Various texts provide overviews of the public communication campaign experience Rice and Atkin, ; Salmon, ; Guttman, ; Hornik, We will not try to present or even summarize that literature, except to indicate that there is substantial evidence that some campaigns have affected important health behaviors, although not in every instance. For the purposes of this chapter, the essential point to understand about such projects is that they involve carrying out a series of operational tasks, and each of those tasks is an opportunity to pay more or less attention to the issue of diversity. The major tasks to be undertaken by a campaign include 1 choosing target audience s and particular behavioral objectives; 2 choosing a message strategy and executions; 3 choosing the mix of dissemination channels and settings; and 4 undertaking formative, monitoring, and evaluation research to support the program. Decisions about each of these tasks will vary with the evolution of the campaign and its audience. A campaign is not defined by a specific and static mix of messages, audiences, and channels. Rather, it is defined as a program that makes decisions about these operational details, decisions that will vary over time. Page 85 Share Cite Suggested Citation: Their own system focuses on six steps: A full description of the art and science

of message development is beyond the scope of this chapter. Details of these steps are not the central issue here. The issue for this chapter is how the fact of diversity has been or might be taken into account as part of the decision process in developing a campaign. We focus on the four broad tasks because they serve to illustrate the argument, while recognizing that a finer differentiation of steps may be required to implement a campaign successfully. Each of these tasks can take special account of concerns about diversity. To accomplish this, campaign developers must understand the link between behavior and health status for the population of interest. Although current reporting systems provide information on the distribution of illness and disease across broad demographic groups and are useful Page 86 Share Cite Suggested Citation: This is because any single group characterized by these broad demographic variables is actually composed of multiple diverse segments with different needs, experiences, attitudes, and behaviors. To address the heterogeneous nature of populations, health communication programs have applied the marketing concept of segmentation. A number of approaches have been developed to help determine optimum audience segmentation. Segmentation assumes that audiences that perceive a message as relevant to their interests, concerns, and problems are more likely to pay attention to the message, to process it deeply, and to remember and act on it, than are audiences that do not perceive the message as personally relevant. An elaboration of these concepts is provided in the following paragraphs. A sensible communication campaign recognizes heterogeneity in its population. First, all members of the population do not have the same status with regard to a behavior. For a youth tobacco prevention campaign, some youth are already heavy smokers, some smoke irregularly, some have smoked in the past but have quit, and some have never smoked but are intrigued and at higher risk of beginning to smoke, while others have never smoked and, regardless of a campaign, are very unlikely to become smokers. Each of these segments of the youth population may require different interventions. The behavioral objective for the heavy smokers may be enrollment in a cessation intervention; for the casual smokers, it may be stopping all smoking; for the prior quitters, it may be developing skills to resist cigarettes in situations that signal smoking temptation; for the intrigued nonsmokers, it may be resisting offers of cigarettes from peers; and for the committed nonsmokers, it may be reinforcing their existing preference. One campaign might choose only one of these audience segments as its target, or at least Page 87 Share Cite Suggested Citation: For example, the National Youth Anti-Drug Media Campaign chose to focus on prevention of trial use of drugs among prior nonusers, and prevention of regular use of drugs among prior occasional users. It did not address current regular users, suspecting that this audience might not be responsive to its efforts. Thus, the audience can be broken down by current behavior and the behavioral objective that campaign planners might seek for each group. However, within each of these behavioral subgroups, there is still more heterogeneity. Assume the antitobacco campaign chose to focus efforts on the intrigued nonsmokers. Some of those intrigued nonsmokers are young teenagers and some are older teenagers; some are girls and some are boys; some are surrounded by peers who smoke and others may have few friends who smoke. Some report frequent contact with prosmoking promotion by the tobacco industry that puts them at risk Pierce and Giplin, , while others do not have such frequent contact. Some may view smoking as a desirable personal symbol of rebellion against authority, while others may be more influenced by knowledge of the negative effects of smoking on athletic endurance. A single message e. Rather, many campaigns assume that if there is heterogeneity in the causes of audience behaviors and in what influences behavior change, then there is a need for heterogeneity in message strategies as well. Populations are heterogeneous in their behavior, and in the correlates and causes of their behavior, but they are also heterogeneous in the ways they can be reached. Some youth are devotees of MTV or hip-hop music radio stations, while others watch widely popular sitcoms or dramas, and some can be found in the audience of the teen-focused WB network. Others are regular viewers of religious television broadcasts, while still others are religiously watching rebroadcasts of the Simpsons after school. Some can be reached in school settings, while others have dropped out; some Page 88 Share Cite Suggested Citation: There are many settings and channels through which intrigued nonsmokers may be reached, and different subgroups are likely to be accessible through each setting and channel. Based on an understanding of the target audience, campaign planners must seek to find the best times, places, and opportunities where the audience will be exposed and open to receiving the message. Finally, just as heterogeneous subgroups can differ in their behaviors, in the

causes of behavior, and channels and settings through which they can be reached, they can also vary in the executions of the messages that will appeal to them. The values they hold, the social groups with whom they identify, and the social activities in which they participate also will influence what messages appeal to them, and thus these factors influence campaign design. One group of youth may be accustomed to quick cuts and intense music and will pay little attention to talking heads in an advertisement. Another group will attend to slower paced ads, but pay close attention to the quality of the argument. Others are persuaded by the source: Some may be enamored of celebrities, and others by those with evident expertise. Marketers, in recognizing this heterogeneity in the audience, attempt to define addressable segments of the audience, people who share behavioral status and a common cause of the behavior, along with other associated experiences, cultural identity, or other characteristics. Those will help define segment-specific message strategy, channel choices, and message execution choices. Health communication campaigns have selected and defined their intended audiences in very different ways. Although some campaigns divide the prospective audience into groups according to characteristics of social diversity such as age, race, income, gender, or education, this is often because only limited information is available about the potential target audiences. The key to the effectiveness of audience segmentation for health campaigns is how well the segmentation approach identifies and separates homogeneous audience segments for which a particular message is personally relevant and motivating from those Page 89 Share Cite Suggested Citation: The goal is to target segments of people who will respond in a similar way so that a health message can be designed to maximize its relevancy. Segmentation is now considered a necessary step in the process of design and development of communication campaigns Atkin and Freimuth, ; Grunig, ; Rogers and Storey, ; Slater et al. Health campaign planners require quantitative evidence to define or identify potential audience segments and both quantitative and qualitative evidence to understand those segments well. The idea of a heterogeneous audience is a core assumption of most current health communication programs. However, only some of that heterogeneity for a particular health behavior will correspond to the diversity categories that are the focus of this volume: For example, regarding marijuana use, although age matters a great deal, the genders are similar. Sexual orientation clearly is related to risk of sexually transmitted disease, but may not be a core issue for planning a campaign to encourage diabetes screening. For some behaviors and for some audiences, other factors may be much more useful for segmenting audiences than any of the focus diversity categories. For example, developers of antidrug campaigns for youth know that risk of drug use initiation is predicted by prior smoking and alcohol use and by a personality variable—“sensation seeking”—none of which are closely related to the traditional demographic categories used for monitoring attention to diversity except for age. However, even in these circumstances, when the traditional diversity variables may not predict behavioral status or even the causes of behavior, these diversity categories may be relevant to the channel choices and the message executions. Blige for young African-American teens as sources for antidrug messages or buy media time on different channels an afternoon soap opera for girls and a football game for boys. Page 90 Share Cite Suggested Citation: Good health communication segmentation may match the diversity categories that are the focus of this volume, but there is no assurance that this will be the case. However, the implicit assumption of targeting is that such groups are homogeneous with regard to their likely responsiveness to campaign strategies. This assumption simply may be wrong or may be a poor predictor of differences in responsiveness, which can lead to inefficiencies in campaign execution. This discussion presents the logic and a few examples of how programs use segmentation to organize their audiences. In that context, we can review a broader set of examples, and how they have brought the focus diversity categories to bear on their choices of audiences, behaviors, assumed motivations for behavior, channels, and message executions. Choosing Among Potential Audience Segments The argument that audiences are heterogeneous is strong, and thus the logic of choosing to consider segmentation is strong. However, which segments deserve priority is not resolved on the basis of the division into segments. Programs use a variety of criteria for choosing among potential audience segments, including: Audience segments often vary according to their potential to benefit from health messages. This may be related to their readiness to accept the message or to their likelihood of being influenced by a communication intervention.

Chapter 3 : Health Communication Campaigns Exemplar - Speaking of Health - NCBI Bookshelf

In public health, there are times where the biggest risk is the way the media communicates a health crisis. The recent ebola outbreak helped to demonstrate that sometimes the media has a negative impact on the population.

CDCynergy The health communication and social marketing practices at CDC draw on the work of scholars and practitioners in a wide range of sciences and disciplines. This has been honed into a strategic communication science process that helps us confront imposing public health challenges. The process includes using multiple behavioral and social learning theories and models to advance program planning, and identifying steps to influence audience attitudes and behavior. Health communication and social marketing may have some differences, but they share a common goal: Generally, a person in social marketing or health communications will create and use products, program or interventions as means to the same end: Social Marketing Take a look at these sentences. What do the bold words have in common? Fasten your seat belt. Pull over to use your cell phone. Talk to your doctor These words describe problems to be addressed by changing behavior. Research may help to describe what your audience is currently doing or thinking, which can help shape realistic goals for behavior change. Social marketing is about identifying the specific target audience segment s , describing the benefits you will offer, and the creating interventions that will influence or support the desired behavior change. PRICE is the cost financial, emotional, psychological, or time-related of overcoming the barriers the audience faces in making the desired behavior change. PLACE is where the audience will perform the desired behavior, where they will access the program products and services, or where they are thinking about your issue. POLICY are the laws and regulations that influence the desired behavior, such as requiring sidewalks to make communities more walkable, or prohibiting smoking in shared public spaces. Essential to the strategic planning for an effective health communication and for social marketing as well is some variation on these steps: Set communication objectives What do we want to accomplish? Analyze and segment target audiences Who do we want to reach? Develop and pretest message concepts What do we want to say? Select communication channels Where do we want to say it? Select, create and pretest messages and products How do we want to say it? Implement communication strategies and conduct process evaluation Getting it out there Conduct outcome and impact evaluation How well did we do? CDCynergy Lite This tool is intended for those who have previous social marketing experience and, in particular, those who are familiar with the full edition. This CDCynergy tool is based on best practice social marketing principles, and will assist you in developing, implementing, and evaluating an effective social marketing plan. Appendices contain useful charts, forms, and questions to help one move through the planning process. We received feedback about how to improve the original tool from many of its users, took their suggestions and made the revisions for this version. Also check out other versions of CDCynergy. Get Email Updates To receive email updates about this page, enter your email address:

Chapter 4 : Recommendations: Analysis of Case Studies

The Guide to Community Preventive Services - The Community Preventive Services Task Force, based on a systematic review of the effectiveness of health communication campaigns conducted by researchers at CDC, found communication campaigns can change health behaviors when combined with the distribution of free or reduced-priced related products.

About Key steps in designing a communications strategy Effective communication is driven by the purpose of the campaign: Within the overall campaign strategy, the communication strategy defines how to capture the attention of the target audiences and convey a compelling campaign message. During the campaign planning process, the problem has been identified, the situation analyzed, the stakeholders and target audiences identified, and the campaign objectives or intended outcomes set. This forms the basis to begin crafting a communications strategy. The following are the main steps involved in developing a communications strategy:

Set the communication goal and objectives: In some campaigns for behaviour-change, communication goals and objectives may be identical to the overall campaign goals and objectives. More commonly, communication goals vary according to different target audiences. This is the norm in advocacy campaigns as primary and secondary target audiences need to be reached differently and will likely take different types of action.

CEDAW and the Convention on the Rights of the Child , and ii stimulate voters to demonstrate their support for a new national law incorporating international standards, e. Develop key messages that effectively speak to target audiences: Messages should be tailored to resonate with the target audience s “ various versions of the message may need to be prepared to reach different audiences. It may need to be adjusted “ while maintaining the essence of the meaning “ to be better understood. It is also important to consider who will deliver the messages, i. For example, behaviour-change messages resonate better from peer groups of the target audience, but awareness and advocacy messages might resonate better from celebrities and politicians. See also *Crafting the Campaign Message*. Read the campaign case study.

Mauritania “ A project started by midwives in Mauritania to assist survivors of sexual violence benefited immensely from the participation of local imams. AMSME provides a variety of programs for women and girls, but one of their key strategies in working to change public opinion was to bring imams on board with the project. Project founders targeted progressive imams and gained their support. Imams attended local sensitization workshops and justified the project as a humanitarian program that would benefit the suffering and vulnerable. Imams ultimately developed religious rationales for project activities such as counseling and providing medical care to rape victims. Imams gathered evidence from the Koran and took it to police, magistrates, and government officials to garner support for assistance to rape survivors.

Identify effective communication channels, techniques and tools: What are the techniques and tools that are most likely to effectively reach the audience s through these different channels? WITNESS is a human rights organization that focuses on educating activists and campaigners on the use of video as a tool for change, and using the internet as a powerful channel to disseminate films and images. See *digital video* for more information and guidance. Evaluations suggest that behavior change campaigns are most effective when they keep repeating the message a technique and combine different channels, including person-to-person contact.

Map accessible communication resources: These include for example, media production skills, access to free air-time or pro bono work by experts, and availability of suitable materials from other e. Set and monitor time-lines, milestones and indicators in action plans: As described in *Action Planning and Monitoring and Evaluation* in this module, a communications action plan helps to translate the strategy into specific guidance for its activities, while monitoring helps to verify, at regular intervals, whether the strategy is progressing as planned, and whether context changes call for adjustments, e. Write up a communication strategy document: This is essential to clearly define, layout and track all the key steps mentioned above. Issues to bear in mind: A communications strategy may need to be adapted during the campaign to respond to new challenges and opportunities. For example, a counter-campaign by actors opposing your goal may prompt you to target new audiences; or sudden, externally imposed restrictions on campaign activism may require adjustments in

planned activities. Specific communication activities or materials may turn out to work more effectively than others, which may prompt you to increase successful activities and reduce those that do not seem to work. New partners may emerge with offers of support that may require adjustments in the strategy. For marginalized groups, particularly those experiencing multiple discriminations, mass media may not necessarily be the best way to reach them especially if this is not in a language they understand, or via a channel they have access to. Some rural minority communities for example, may not understand the national, mainstream language, and they may not have proper access to radio, TV or the internet, making print materials more useful in this case including pictorials for illiterate communities. In some contexts, specialized media that targets marginalized groups may exist – such as print media in Braille; radio or TV stations that broadcast in minority languages. It is useful to research how effectively these can be utilized in campaign activities. In addition, community-level work, e. Please refer to the section on Community Mobilization for more guidance.

Chapter 5 : WHO | Why health communication is important in public health

Speaking of Health looks at basic theories of communication and behavior change and focuses on where they apply and where they don't. By suggesting creative strategies and guidelines for speaking to diverse audiences now and in the future, the Institute of Medicine seeks to take health communication into the 21st century.

Correspondence to Rajiv N Rimal e-mail: Bulletin of the World Health Organization ; This increase in the prominence of the field, externally, is happening contemporaneously with important developments taking place, internally, one of which is the focus on the study of environmental, social and psychological influences on behaviour and health. Given the global challenges posed by major threats, health communication scholars and practitioners recognize the importance of prevention and, with it, the need to understand human behaviour through the prism of theory. This has given rise to theorizing about the role of risk perceptions, 2 , 3 social norms, 4 , 5 emotions 6 , 7 and uncertainty 8 in health behaviours. Communication is at the heart of who we are as human beings. It is our way of exchanging information; it also signifies our symbolic capability. These two functions reflect what James Carey characterized as the transmission and ritual views of communication, respectively. Thus, communication can be defined as the symbolic exchange of shared meaning, and all communicative acts have both a transmission and a ritualistic component. Intervention efforts to change behaviours are communicative acts. By focusing mostly on the transmission function of information exchange, such efforts often neglect ritualistic processes that are automatically engaged through communication. In adopting the transmission view of communication, it is reasonable to think carefully about the channels through which intervention messages are disseminated, to whom the message is attributed, how audience members respond and the features of messages that have the greatest impact. These considerations reflect the essential components of the communication process: In the ritual view, however, target audiences are conceptualized as members of social networks who interact with one another, engage in social ceremony and derive meaning from the enactment of habitual behaviours. Three important intervention considerations emerge from this dual view of communication. First is the realization that communication interventions do not fall into a social vacuum. Rather, information is received and processed through individual and social prisms that not only determine what people encounter through processes of selective exposure , but also the meaning that they derive from the communication known as selective perception , depending upon factors at both the individual prior experience, efficacy beliefs, knowledge, etc. Second, it is reasonable to expect discrepancies between messages disseminated and received. They arise not only due to differential exposure to the intervention but also because of the differences in interpretation in decoding information. A careful study of the correspondence between messages as they are sent and received is thus of great importance to avoid unintended and worse, counterproductive effects. One of the central tenets of health communication interventions is the need to conduct extensive formative evaluation, audience needs assessment and message pretesting is the direct offshoot of this understanding. Use of these health communication principles in public health presents challenges. First, the evaluation of communication interventions, especially those using national mass media e. Hence, innovative methodological and statistical techniques are required for attributing observed outcomes to intervention efforts. The responsive and transactional nature of health communication interventions also means that modification in intervention content may occur, adding an additional challenge to the evaluation process. Second, the recognition among behavioural scientists that causes of human behaviour reside at multiple levels that reinforce each other poses difficulties in designing and testing multilevel interventions. This complexity of health behaviour determinants also requires a multidisciplinary approach for effectively promoting change, which further means that interventions need to incorporate expertise from a variety of professional backgrounds. Finally, because of the rapidly changing communication channels, health communication interventions need to make extra efforts to meet their audiences at their level of technology use. Health communication has much to celebrate and contribute. The field is gaining recognition in part because of its emphasis on combining theory and practice in understanding communication processes and changing human behaviour. This approach is pertinent at a time when many of the threats to

global public health through diseases and environmental calamities are rooted in human behaviour. By bringing together researchers and practitioners from diverse disciplines and adopting multilevel theoretical approaches, health communicators have a unique opportunity to provide meaningful input in improving and saving lives. Read more about health communication in the upcoming special theme issue of the Bulletin in August

Chapter 6 : Key steps in designing a communications strategy

future health communication campaigns. The instructor has served as principal or co-investigator on a number of research projects sponsored by the Colorado Tobacco Research Program, the National Institutes of Health over the last 12 years.

A combination of quantitative and qualitative analytic techniques was used by the Subcommittee in comparing PHS health risk communication practices against a model standard of risk communication developed by EPA. Second-order numbers, such as means and percentage distributions, were calculated to examine the tabulations and their relationships further. Results of that analysis are shown in Tables 2 through 4. Findings from Table 2 show a range of variation as well as some consistency in how effectively PHS agencies planned, implemented, and evaluated health communication strategies. Some of the lower percentage values i. Without the necessary information, the Subcommittee was unable to make precise judgments or statements about health risk communication effectiveness. With those few exceptions, enough information and data were available to show that most PHS agencies recognized the importance of and need for a systematic approach to health risk communications. Two case studies in particular serve as prime examples of how agencies benefit when health communication is well planned and well executed. In an effort to inform the public about the risks and benefits of fluoride, EHPC identified several key factors that contributed to the overall success of its health communication campaign. Another clear example of how health risk communication methods can work came from FDA. With a few effective principles, FDA was able to reach its intended audience with the message about the dangers of defective heart valves. Table 4 takes the analysis of results in Table 3 one step further, to look more specifically at the Cardinal Rules that figured prominently in health communication activities of PHS agencies. On the basis of percentage distributions, the Subcommittee was able to group the Cardinal Rules for each case into the three broad categories of "highly effective," "moderately effective," and "least effective. An analysis of the data in Table 4 reveals that in the "highly effective" category, Cardinal Rules 1 Accept and involve the public as a legitimate partner and 5 Coordinate and collaborate with other credible sources seem to be common to most PHS agencies. In the "moderately effective" category, Rule 6 Meet the needs of the media is found most frequently. In the final category of "least effective," Rule 2 Plan carefully and evaluate efforts occurs most often. A qualitative analysis of the case studies reveals varying beliefs among PHS agencies about what the content, process, and outcomes of a health risk communication should be. To simplify the analysis, the Subcommittee grouped the EPA Cardinal Rule critical elements into the broadly recognized communication categories shown previously in Table 1: Using this schema, the Subcommittee was able to identify some perceived strengths and weaknesses of PHS health risk communication practices. Communication content, the first component, refers to the value of the information or message as perceived by the receiver. The amount of emphasis given to content varied substantially among the agencies. FDA, for example, expended a great amount of effort in content analysis and the pretesting of messages. Some agencies, on the other hand, chose to create messages with little audience input. Gaps in the content component of health communication campaigns were fairly evenly distributed across the agencies and present some relevant questions: Did content facilitate the achievement of communication objectives? Was message and information content relevant to the targeted behavior i. Did the audience understand the information; was it relevant and useful? Communication process is the second and most labor-intensive of the components. During this stage, the rationale for choosing specific health risk communication strategies and techniques is proven either effective or ineffective. Most of the agencies that submitted case studies are currently involved in health risk communication activities to some extent. Yet, few of the agencies could clearly explain the rationale and content of their health risk communication goals and strategies. Several factors contributed to this condition. First is an inadequate recognition that audiences differ greatly in value systems and levels of involvement in the health risk communication process. FDA provided one exception to this trend by conducting focus tests with their audiences to identify relevant needs and expectations. Second, systematic methods for defining health risk communication needs and responsibilities were unspecified. Third, discussion about the role of

health risk communications as a function of agency mission, goals, and objectives is too limited. Finally, barriers to the effectiveness of health risk communications may be internal, such as constraints of staff, resources, and budget, or external, such as the activities of interest groups or the limits set by policy or mandate. Having to explain health risk and uncertainty were common experiences shared by most of the agencies. Yet the specific procedures that were used in the various risk events differed according to the type of health risk issue, the scope of the problem, and levels of public concern. CDC, in its Hanford Environmental Dose Reconstruction Project, provides an excellent example of how, when properly implemented, the process can achieve the desired outcomes. CDC very effectively organized its health risk communication campaign around the simple principle of using multiple media strategies to build community trust and support. The last component, outcome and impact evaluation, is an ongoing and systematic procedure for assessing the efficacy of health risk communication strategies in achieving intended outcomes. Evaluation, among the agencies, was the least understood of the communications components. Collecting process and anecdotal information was the preferred method of evaluation. However, to properly judge the effect of a health risk communication activity, measurable objectives must be designed in the planning stage and tracked until the completion of the activity. One of the evaluation successes involved NIMH and its study of reducing sexual risk behaviors among runaways. Basic evaluation rules were put in place before, during, and after the intervention program. Both qualitative and quantitative evaluation measures were used. With these measures, NIMH was able to assess audience perceptions, track the achievement of communication objectives, and improve the quality of services provided to runaways.

Comprehensive health communication campaigns are goal-oriented attempts to inform, persuade or motivate.

Athens, GA, , Phone: Integrating exemplification theory with risk communication research, the effect of using virtual simulations to exemplify health risks of soft drink consumption was assessed across three weeks. Three dimensions of risk perception perceived likelihood, susceptibility, severity, involvement with the health issue, and soft drink consumption were measured across three weeks. Virtual exemplars were the most effective channel to increase perceived likelihood, perceived susceptibility, involvement, and soft drink consumption over time. Exemplification did not affect perceived severity. In particular, between the years and , the intake of added sugars remained high and unchanged among year-olds and even increased among those 20 years old and older Johnson et al. To this extent, young adults should be considered a priority in primary prevention efforts to reduce soft drink consumption. Guided by the framework of exemplification theory Zillmann, and risk communication research, the current study makes several contributions to health communication research. First, the use of concrete, illustrative, and representative cases of a phenomenon—“exemplars”—to highlight the perceived health risk of soft drink consumption was tested within the context of a real-world health promotion campaign to observe their effects on health behavior. In addition, the effect of virtual simulations as a novel channel of exemplification was tested and compared against traditional exemplars and statistical information. Furthermore, changes in the perception of health risk, involvement regarding the health issue, and health behavior as a result of viewing health messages with exemplars were explored across three weeks to investigate the persistence of exemplification effects. The relationships between exemplification channels, perceived risk, and health behavior were also explored. Exemplification Theory—“The Persuasive Power of Examples Much of human communication involves the use of exemplars, which are illustrative case reports that depict typical characteristics of a person, object, or an event. First, the quantification heuristic drives individuals to infer the seriousness and frequency of a phenomenon based on exemplars. For example, upon observing concrete cases of an illness, an individual is likely to assume that the illness occurs frequently and thus perceives greater health risk than those who have not seen concrete cases. Relatedly, the base-rate fallacy Bar-Hillel, predicts that providing numerical information i. Finally, the availability heuristic Kahneman, proposes that individuals are likely to rely on exemplars to form beliefs because concrete examples tend to be more cognitively accessible than abstract information such as numbers. Health communicators may take advantage of these heuristics by incorporating exemplars in health risk information to effectively persuade readers to avoid future risks. Risk Perception and Health Behavior Change Risk perception stands at the core of most health behavior theories because of its strong correlation to behavior change Brewer et al. The anticipation of, and the desire to avoid negative health outcomes i. As such, constructing health messages that meaningfully heighten risk perceptions may be an effective approach to promoting desirable health behaviors. Because the negative effects of soft drink consumption, such as weight gain, are gradual over time, the temporal distance between the cause e. Imagining future negative health consequences may then become difficult, leading to misperceptions of low risk. Others have demonstrated that young adults underestimate the severity of future health consequences Cohn et al. Thus, constructing health messages that provide a salient and concrete link between present health behaviors and future negative health consequences for seemingly benign health choices, such as soft drink consumption, may be an effective means to heighten risk perceptions and motivate young adults to adopt desirable health behaviors. Exemplifying Health Risk to Heighten Risk Perception Providing contextual information through exemplars when presenting health risks may be an effective way to heighten risk perceptions. For instance, a study found that a print advertisement for organ donation with a picture exemplar i. Outside the realm of exemplification theory, a number of channel studies have compared the persuasive effect of visual against verbal messages. Pictures provide concrete and realistic cues that are easier to label, resulting in greater cues that assist recall Paivio, Thus, constructing exemplars that emphasize visual elements may be an effective strategy for high impact health messages. Further examination of the risk communication literature suggests that perceived risk is comprised of multiple

dimensions: First, the quantification heuristic, which refers to the way individuals who are exposed to concrete exemplars of an event tend to infer that the event occurs frequently, is related to the perceived likelihood dimension of risk i . This is related to the perceived susceptibility dimension of risk i . Finally, the representative heuristic, which refers to the way individuals who are exposed to exemplars infer an impression of an entire event based on the sliver of information in the exemplar, is related to the perceived severity dimension of risk i . Virtual simulations, computer rendered environments that digitally depict hypothetical events, can concretely present changes between the present and the future in mere seconds, and this virtual acceleration of time can help reduce perceived temporal distances between present health behaviors and future health consequences Ahn. In the current study, a virtual simulation was developed as an exemplar to illustrate the health consequences of soft drink consumption: However, experimental stimuli in these studies were presented as independent, discrete experiences rather than an exemplar integrated into a message. Furthermore, the perception of risk over time as a result of exposure to virtual simulation and its effect on health behavior change has rarely been explored. In the current study, virtual and picture exemplars will be digitally embedded in a health promotion pamphlet developed to reduce soft drink consumption. Embedded in a pamphlet, the exemplars do not deliver new information content outside of what is already described through numbers and statistics in the pamphlet. Rather, they serve to highlight a segment of the information presented in the pamphlet as an illustrative case e . The current study will build on earlier findings and investigate the strength of virtual exemplars as a channel of exemplification in highlighting existing health information provided via traditional channels and heightening risk perceptions to promote healthy behaviors. The inclusion of the virtual exemplar in a health pamphlet is likely to help individuals create a more concrete mental image of the health risk discussed in the pamphlet compared to the same information presented through numbers and statistics, without an exemplar: Immediately following treatment, virtual exemplars will elicit higher perceived likelihood $H1A$, perceived susceptibility $H1B$, and perceived severity $H1C$ than base-rate statistics. The dynamic illustration presented in the virtual exemplar e . As strong connections between present causes and future consequences leads to high perceptions of risk Leventhal et al. Immediately following treatment, virtual exemplars will elicit higher perceived likelihood $H2A$, perceived susceptibility $H2B$, and perceived severity $H2C$ than picture exemplars. Related research has shown that virtual simulations that heighten risk perceptions also significantly increase the perception of personal relevance Ahn et al. If virtual exemplars are indeed able to heighten risk perceptions of soft drink consumption, it is likely for individuals exposed to the health message to feel relevant to and involved with the issue of soft drink consumption: Immediately following treatment, virtual exemplars will elicit greater perceived involvement with the issue of soft drink consumption than base-rate statistics $H3A$ and picture exemplars $H3B$. The increase in risk perception and high involvement with the health issue is likely to motivate an increase in intentions to reduce soft drink consumption: Immediately following treatment, virtual exemplars will elicit lower intentions to consume soft drinks than base-rate statistics $H4A$ and picture exemplars $H4B$. Little studies, if any, have systematically investigated the change in risk perception and ensuing health behavior change as a result of exposure to messages sent through different channels. Thus, in addition to comparing the effects of health messages that feature base-rate statistics only, picture exemplars, and virtual exemplars, changes in these message effects will be assessed over three weeks in time: How will perceptions of risk susceptibility, likelihood, severity $RQ1A$, and perceptions of issue involvement $RQ1B$ change from one week prior to treatment, to immediately following exposure to treatment, and to one week following exposure to treatment? How will soft drink consumption behavior change from one week prior to treatment baseline, to immediately following exposure to treatment consumption intention, and to one week following exposure to treatment consumption? Finally, the role of all three dimensions of risk and involvement in reducing consumption intention and ultimately consumption behavior will be investigated to explore underlying mechanisms of the exemplification effect. Do risk perception susceptibility, likelihood, severity and involvement mediate the relationship between media channels and consumption behavior? On average, the participants spent 3. No participant reported dietary restrictions or health concerns e . Eleven participants were lost one week later at Time 2, and three more were lost the following week at Time 3. The six-page pamphlet provided information and statistics on how soft

drinks lead to weight gain. The pamphlet warned that an average of ten pounds a year might be gained as a result of consuming the extra calories and presented a picture of a cup filled with fat, ostensibly being poured from a soft drink bottle. The first five pages of the pamphlet were kept the same, and the stimuli used in the exemplar conditions was embedded in the sixth page. Participants clicked the play button to view the health consequence of soft drink consumption. The virtual exemplar depicted a same sex college student virtual human drinking one soft drink a day for two years and gaining 20 pounds of weight. As the virtual agent consumed the soft drink throughout the years, its body grew larger due to weight gain. The participants also saw and heard the 20 pounds of fat splattering onto a digital scale, comparable to the cup full of fat depicted on the pamphlet Figure 1. One picture was the first screen of the virtual exemplar, depicting a same sex college student in the year drinking a soft drink. In this condition, no exemplars were included. Procedure The experiment was conducted in three online interactions. One week before the experiment Time 1 , participants responded to an online pretest measuring their baseline soft drink consumption, risk perception i. One week later Time 2 , participants were randomly assigned to an experimental condition and received a link to an online survey. After reading the pamphlet, the participants completed an online survey. One week following experimental treatments Time 3 , all participants received an email asking about their soft drink consumption, risk perception, and involvement. Soft drink consumption was measured using the beverage intake questionnaire Hedrick et al. The item assessed beverage intake in two parts—frequency and amount. The frequency and amount were then multiplied to create indices of soft drink consumption at base rate, consumption intentions, and actual consumption. Baseline measures were collected Time 1 to control for individual differences in existing soft drink consumption patterns in ensuing analyses. Consumption intentions Time 2 assessed how the treatments may have influenced intentions to consume soft drinks in the following week. Finally, consumption Time 3 assessed actual soft drink intake during the week. RQ1A inquired about changes in risk perception over time. A repeated measures analysis of covariance ANCOVA was conducted with time as the within- subjects factor, exemplification channel as the between-subjects factor, perceived likelihood at Times 2 and 3 as the within-subjects variable, controlling for perceived likelihood at Time 1. Means Table 1 indicated that at Time 2, the effect of picture and virtual exemplars resulted in greater perceived likelihood than the effect of base-rate statistics. At Time 3, the effect of the virtual exemplar amplified, resulting in greater perceived likelihood than base-rate statistics or the picture exemplar. To further investigate differences across conditions, a univariate analysis of variance ANOVA was conducted with exemplification channel as the independent variable and perceived likelihood at Time 2 as the dependent variable. The virtual exemplar did not yield greater perceived likelihood immediately following treatment than the picture exemplar or base-rate statistics. H1A and H2A were not supported. A repeated measures ANCOVA was conducted with time as the within-subjects factor, exemplification channel as the between-subjects factor, perceived susceptibility at Times 2 and 3 as the within-subjects variable, controlling for perceived susceptibility at Time 1. Across all conditions, there were little changes in perceived susceptibility over time. To further investigate differences across conditions, a univariate ANOVA was conducted with exemplification channel as the independent variable and perceived susceptibility at Time 2 as the dependent variable. H1B and H2B were supported. A repeated measures ANCOVA was conducted with time as the within-subjects factor, exemplification channel as the between-subjects factor, perceived severity at Times 2 and 3 as the within-subjects variable, controlling for perceived severity at Time 1. To further investigate differences across conditions, a univariate ANOVA was conducted with exemplification channel as the independent variable and perceived severity at Time 2 as the dependent variable. At Time 2, the virtual exemplar did not yield greater perceived severity than the picture exemplar or base-rate statistics. H1C and H2C were not supported. Effect of Exemplification on Involvement RQ1B inquired about changes in involvement with the issue of soft drink consumption over time. A repeated measures ANCOVA was conducted with time as the within-subjects factor, exemplification channel as the between-subjects factor, involvement at Times 2 and 3 as the within-subjects variable, controlling for involvement at Time 1. Involvement decreased over time across experimental conditions.

Chapter 8 : Health Communication, Social Marketing | The Community Guide

From the outset, this project employed a critical-cultural approach common to the social ecology model of health communication, which involves 'reflexive interrogation of modernist assumptions underlying health communication campaigns' (Dutta & de Souza, Dutta, M., & de Souza, R. ()).

Akron, Ohio USA kclark uakron. The purpose of this introductory essay to these three issues of the Electronic Journal of Communication focusing on the Sense-Making Methodology is to provide: The substantive foci represented by the exemplars include: Discourse communities include both qualitative and quantitative studies; survey research and ethnography; media uses and effects; cultural studies reception analysis; and feminist studies, among others. Disciplinary fields represented include: What all exemplars share in common is the use of the Sense-Making Methodology as a source of methodological guidance for virtually every aspect of research step-taking -- conceptualizing and framing questions, observing, interviewing, listening, and analyzing. Being exemplars, each article is an explication of how Sense-Making Methodology has been useful for conducting research that addresses questions pertinent to a particular discourse community. First and foremost, each study was intended to stand on its own within its designated discourse community. In that context, the authors were asked to proceed with their research reports as is usual for their particular community and its analytic approach. The difference, however, is that the articles for these Electronic Journal of Communication EJC issues were intended to serve both as interventions in these designated discourse communities and at the same time exemplify the uses made of Sense-Making. We have divided the 18 articles into five groups in terms of their substantive foci for purposes of organizing these issues -- public communication campaign audience research; media studies, mass communication, and new technologies; health communication and information seeking; information seeking and use in context; and religious communication studies. Within these substantive foci, the authors use both qualitative approaches and quantitative; inductive digs and deductive applications; phone, group, and face-to-face interpersonal interviews. While all authors collected data in whole or part from interviews, most used units of analysis other than the person: All intersected on a conceptualization of the person as moving across time-space. Some combined their uses of Sense-Making with ethnographic field work; others used phone surveys based on random samples; still others drew judgmental samples for in-person interviews. Some spent as much as a year or more collecting their data; others took as little as a week. Some interviewed very small numbers of informants, as few as one; others interviewed respondents numbering in the hundreds. Some used formalized interviews; others embedded their interviews into naturalized activities. Most used interviews which were entirely open-ended, but one was almost entirely closed-ended. Some analyzed texts, some did thematic and narrative analyses, some content analyses, and some statistical analyses. Some used almost all of them. Some used Sense-Making in primarily practical and applied ways; others soared to the abstract heights. The answer is that each turned to the Sense-Making Methodology in whole or part to execute their studies. In the development of Sense-Making, Dervin and colleagues have explicitly intended it to be a methodology in the broadest conception of that term. To this end, Sense-Making stands between approaches usually the more quantitative which too often relegate the term methodology to method; and approaches usually the more qualitative which too often elide the term methodology into meta-theory. In contrast, Sense-Making has been developed as a methodology between the cracks Dervin a. Clearly, methodology has been traditionally defined as a branch of philosophy and Sense-Making has treated the term as such. However, Sense-Making has attempted to build a deliberate methodological bridge to method by providing meta-theoretic guidance in such a way that it guides method without artificially constraining it. Thus, Sense-Making consists of an elaborate set of meta-theoretic premises about the nature of reality, human beings, information, and the phenomena of sense-making, and communicating. These have been applied in a set of methodological tools intended to guide method, including the methods of framing research questions, observing and collecting data, and conducting analyses. Sense-Making has been developed as a general methodology, one applicable to any study of human sense-making and sense-unmaking. Thus, Sense-Making has been developed to stand "between the cracks" in

multiple ways -- between, for example, the artificial polarizations of quantitative versus qualitative, deductive versus inductive, prediction versus explanation, theoretic versus applied, contextual versus generalizable, random sampling versus judgmental sampling, modern versus post-modern, critical versus administrative, structure versus agency, stability versus change. How Sense-Making attempts to build these bridges is the subject of a tale longer than can be told here. For the interested reader, however, there are 18 answers included in these EJC issues, each provided by the authors of the 18 articles. These 18 authors, thus, all clearly have a vision and mission in common. At the same time their source discourses as well as their applications and implementations are so varied that for many the only overlap is their common use of Sense-Making. But their common use of Sense-Making carries with it a common acceptance of how researchers can usefully intersect with the researched and usefully conduct research that has both theoretical as well as practical implications for communication practice. Perhaps the fundamental divide which these articles and Sense-Making have attempted to bridge is that of the dominant assumption in most social science related studies which holds that substantive terrains of focus are of such sufficient difference that theorizings must be developed in isolation. We have, thus, a plethora of communication theories, and we have as well a plethora of theories about every phenomenon which is a focus in these 18 articles. From a Sense-Making perspective, this narrow and limiting attention to substantive domains has had many deleterious impacts on scholarship. Examples of these include: More than anything, however, this attention to substances over essences has meant that in the midst of the expansion to cyberspaced communication, multiple fields both inside and outside the social sciences have jumped on the communication bandwagon. This is proliferating yet another plethora of substantive theories and moving us further away from the once valued vision that the study of communication potentially offered something of foundational theoretic value. If we draw a distinction between different kinds of theorizings, we can distinguish substantive theorizing as that kind of theorizing which aims to describe phenomena. It becomes distinct, thus, from the kind of theorizing that aims to guide our presumings, and lookings, and collectings, and analyzing. This latter kind of theory can be called meta-theorizing but more properly it requires more explicit attention to methodology than the term meta-theory generally imparts in common academic usage. What we need are approaches that are at one and the same time theory for method and method for theory. Sense-Making has attempted to be both. Sense-Making is useful to these diverse authors, thus, because it does not operate in the world of nouns and substances, but rather in the world of verbs and processes. Further, it rests on the foundational premise that acts of communication internal and external; intrapersonal, interpersonal, or collective; direct or mediated all have something in common and can be theorized as such. A listing of the foundational meta-theoretic premises of Sense-Making is presented below as a suggestive portrait of what is involved in the reach of the authors of these 18 articles. These premises have been explicated elsewhere Dervin, a , b so they are being presented here more for their metaphoric and poetic values than the precise thrust of their meanings. Sense-Making as a methodology mandates attention to: The authors of the EJC articles, then, ascribe in whole or part to a common set of meta-theoretic premises. All share a wish to bring to bear on their studies an approach to thinking about, observing, talking to, and drawing conclusions about human beings in a way that frees them as researchers as much as possible from the substantively-based noun theorizings usually imposed on the researched. In this way, Sense-Making might be called a mandate for a new kind of listening. But the listening from a Sense-Making perspective would more properly be called listenings, thinkings, pointings, observings, concluding, assumings, contestings, and reflexings. At root, Sense-Making has been developed as a methodology for the practice of communication with communication defined as made up of multiple communicatings, as verbings Dervin, One such communication context for Sense-Making is the context of researching. Sense-Making, thus, mandates a methodological approach to research which is embedded in meta-theory in the sense of a praxis -- i. Describing Sense-Making, its many assumptions and methodological tools, is beyond the purpose of this introduction to these three EJC issues. Dervin and colleagues have purposely delayed writing extensive overviews of Sense-Making for almost 20 years because the project demanded multiple voices and visions and it required forging in multiple contexts across time. These special issues of EJC are a first step to a more comprehensive and systematic presentation of the developments. Readers interested in pursuing the

foundational writings on Sense-Making are invited to pursue the items listed in the annotated bibliography which ends this introduction. Alternatively, readers are encouraged to read from among these exemplars, consciously pushing across discourses to search for commonalities and contests because in the intersection of these multiple views of Sense-Making there is much to learn. The 18 Articles in the Three EJC Issues The 18 articles in these three issues of EJC issues are divided for presentation into five groups based on their emphases of specific substantive discourse communities. These groupings have been organized, in opposition to Sense-Making premises, along noun dimensions rather than verbing dimensions. The reason is, of course, that we want to attract readers working in particular discourse communities. In short, while attempting to build a path to our conception of what theorizing in communication might look like in the future, we must both acknowledge and honor what is current. Some of the articles in these issues came directly out of discourse communities in which the founding authors of Sense-Making have written -- public communication campaign audience research, for example; health communication; information seeking in context. Others involve marked innovations in application -- reception analysis in cultural studies, for example; studies in media education and alternative media; examination of postings by users of web-sites; and religious critique and reinvention. The groupings of the articles as presented in these three EJC issues are as follows: In every one of these cases there is a hope coming from some institutional direction that these target audiences ought to care about, attend to, or in some way change themselves vis-a-vis the issue in question. What the authors of these articles have in common is an interest in understanding how the target audiences make sense outside the external imposition of institutional and expert worldviews. Four of the authors -- Frenette, Dervin et al. The fifth article by Murphy is grounded in the discourse community which focuses on meanings of wilderness and serves, thus, as an exemplar of how Sense-Making has been used to serve practical audience research mandates in the formative stages of public communication design. Brenda Dervin, Jayme E. In moments of concern: A Sense-Making study of pregnant drug-addicted women and their information needs. Madden, Making sense of environmental messages: The human experience of wilderness. Media Studies, Mass Communication, and New Technologies The second group of articles focuses in different ways on encodings and decodings of mediated messages divided neatly for purposes here into two sets -- studies focusing on encoding and those focusing on decoding. From a Sense-Making perspective, of course, the line is not so tidily drawn. The six studies in this group are anchored in different research genres. Two focus on media practitioner encodings. The article by Huesca examines a well-known alternative media genre the radio stations operated by Bolivian tin miners regarding how these broadcasters conceptualized and responded to difference in their everyday activities. The second article by Higgins uses Sense-Making to examine the realization of the empowerment vision in the accounts of their projects by community volunteer producers at a public access cable television facility. The studies focusing on audience decoding comes from three different discourse communities. The two by Shields and by Dworkin et al. The next study in this set Spirek et al. Between diversity and solidarity: The challenge of incorporating difference into media practices for social change. John Higgins Sense-Making and empowerment: Advertising to the gendered audience: Using Sense-Making to illuminate how audiences decode advertisements of idealized female bodies. Sense-making and television news: An inquiry into audience interpretations. Bridging gaps between audience and media: A Sense-Making comparison of reader information needs in life-facing versus newspaper reading contexts.

Chapter 9 : Article from ejc/rec

Exemplars' impacts in marketing communication campaigns Rodrigo Uribe•Ž, Enrique Manzur, Pedro Hidalgo Universidad de Chile, School of Business, Chile article info abstract.

Use of child booster seats in motor vehicles following a community campaign: Evaluation of community-based programs to increase booster seat use. Developing, implementing, and evaluating a condom promotion program targeting sexually active adolescents. Mobilizing young gay and bisexual men for HIV prevention: Increasing condom use among adolescents with coalition-based social marketing. Effects of an institutional AIDS prevention intervention: A community level syphilis prevention programme: Effects of "10, steps Ghent": Bicycle helmet use by children. Evaluation of a community-wide helmet campaign. Helmets for skiers and snowboarders: Increasing bicycle helmet use in the community. Measuring response to a wide-scale, 2-year effort. Ressler, WH, Toledo E, Rouzier P, Alto WA. Evolution of a successful community bicycle helmet campaign. Increasing bicycle helmet use in Michigan: Head injuries to pedal cyclists and the promotion of helmet use in Victoria, Australia. Tobacco quitline use enhancing benefit and increasing abstinence. Offering free NRT through a tobacco quitline: Comparison of interventions to reduce sun exposure. Evaluation of a safe sex campaign regarding AIDS and other sexually transmitted diseases among young people in the Netherlands. Mass media as an HIV-prevention strategy: The effects of using fear in public AIDS education on the behaviour of homosexually active men. Learning from the Norwegian experience: Giving away free nicotine medications and a cigarette substitute Better Quit [R] to promote calls to a Quitline. *J Public Health Manag Pract* ;12 1: *Arch Pediatr Adolesc Med* ; 6: *J Phys Act Health* ;3 1: Reach, efficacy, and cost-effectiveness of free nicotine medication giveaway programs. Correlates of pedometer use: Results from a community-based physical activity intervention trial 10, Steps Rockhampton. Cost effectiveness of the Oregon quitline "free patch initiative". *Tob Control* ;16 Suppl 1: Cost-effectiveness of the Mpowerment Project, a community-level intervention for young gay men. *J Acquir Immune Defic Syndr* ;27 5: *Health Promot Pract* ;8 3: Translating research into practice: The dissemination and initial implementation of an evidence-based HIV prevention program. *J Am Board Fam Pract* ;8 4: A school-based intervention pilot program. Michigan Helmet Advisory Committee. *Accid Anal Prev* ;40 1: Wood T, Milne P. *Accid Anal Prev* ;20 3: Search Strategies The following databases were searched from January to December to identify studies assessing the effectiveness of health communication campaigns that include product distribution: The search yielded 15, articles, books, and conference abstracts. The search period of the literature was from January to December In addition to the databases searched in the effectiveness review i. Search Terms Economic-specific keywords listed below were combined with effectiveness search terms.