Communication, Health and the Mass Media

Effects from a strategy

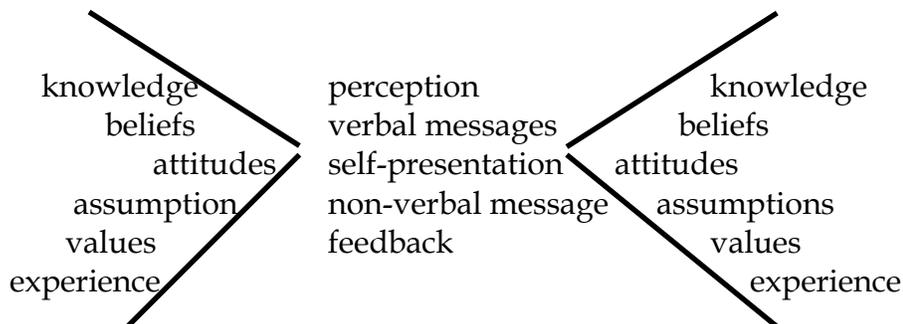Effects from a communication strategy, Flay & Burton, 1990, suggest that

- knowledge is changed first

- then attitudes

- then behaviours

Plans for evaluation should take this into account and expect the effects from the communication strategy to be staggered. Different methods of evaluation are used to measure different outcomes from any strategy. It is crucial to consider at the planning stages of a communication strategy how it will be evaluated.

Interpersonal Communication Models

Interpersonal communication is communication between people and usually this is face-to-face interaction. An understanding of the processes involved in interpersonal communication are essential when planning a strategy. The model below devised by Dimbleby and Burton, 1985, is comprehensive in providing an overview of the areas that need to be considered.

Interpersonal communication factors

knowledge   perception   knowledge
beliefs   verbal messages   beliefs
attitudes   self-presentation   attitudes
assumption   non-verbal message   assumptions
values   feedback   values
experience   experience

Dimbleby & Burton, pp68, 1985

For effective communication to take place there needs to be either similar views held by two people or an understanding of the possible differences in attitudes, experiences and perception that could lead to a break down in communication. If a persuasive message is planned the person sending the message can adapt it depending on their knowledge of the person they are communicating with. The use of opinion leaders to pass the message on to friends and colleagues is likely to be more effective because these people will have a greater understanding of how to communicate and pick up feedback than an outsider to the organisation.

Health communication campaigns include mass media methods, interpersonal communication and community based elements. Many campaigns intend to bring about some type of preventative health behaviour. It is increasingly common for communication strategies to be planned by more than one organisation.

The Hypodermic Syringe Model

The hypodermic syringe model is a theory of media effect on audience. The term is used to describe interaction between the media and public belief, offering the concept of people becoming affected by the information 'injected' into them through their information medium. For example, television viewers would have their minds injected with sex and violence after watching too many graphically violent programmes, and this would affect their views and behaviour. However, as evidence began to show there was not a simple cause and effect route other theories were developed.

2 Step Flow Model

The concept of opinion leaders within theories of mass media effects. Glover, 1986, summarised the findings of Katz and Lazarsfeld by describing the two-step flow model as showing that using mass media can be effective but that "we are influenced by members of our family, our friends and co-workers and therefore those who direct and help form opinions are not special high status individuals but are found at every level of society." (Glover, 1986, pp5)

The process of using opinion leaders is not automatic (Rogers, 1995, Windahl, 1998, Glover, 1986) but by being aware of the concept it becomes possible to devise strategies to identify and nurture positive outcomes. Windahl et al, 1998 suggests that this can provide some control if the opinion leaders are gathered together to be given information and then urging them to pass this onto others.

Communication of Innovations theory

The theory describes the process of how an innovation is taken up. An innovation is an idea, practice or object perceived as new by an individual or group (Rogers, 1995). The theory is concerned with the rate of adoption and the impact of variables on the rate of adoption.

Understanding this model could be useful when planning a communication strategy, especially within organisations. Winhahl et al, 1998, reminds us that organisations are often slow and resistant to change. The theory suggests that different people within an organisation will respond to an innovation at varying times.

- A small percent of people called 'isolated enthusiasts' will respond quickly and readily.
- A second section of people called 'opinion formers or leaders' will respond next and also have the persuasive power to affect other peoples views.
- The majority of the organisation will then take up the innovation
- Leaving what is termed the 'laggards' still unlikely to be affected by the change (Ashton & Seymour cited in Sheaff, 1991).

Social Marketing

It is important to segment and understand your audience(s). Backer et al, 1992 argues that knowledge of your audience is crucial if you are considering which people will be ready for change before others.

Social Marketing is an approach that uses methods from commercial marketing and applies them to social issues. When using a model of social marketing a communication strategy should include;
- audience segmentation
- consumer orientation
- formative evaluation research methods
(Atkin & Wallack,1990, Backer et al, 1992).

This approach is most useful when applied to a health promotion situation where there is a clear problem and objectives identified. It also allows for local organisations, intersectoral collaboration and interpersonal networks as part of the change process (Atkin & Wallack, 1990).

Information from market research should directly link to the construction of the message. The content of the message needs to credible, grasp attention and offer something desirable to the audience.

Sheaff, 1992 suggest that this means, "Different media are likely to appeal to, and influence, each target audience." and that different promotion activities can be mutually reinforcing rather than conflicting with or undermining each other (pp 141 1991).

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Elements in the process of planning a campaign

Media components
- Chosen media components from those available; for example print media, booklets, newsletter, posters, flyers organisational methods,

Structure of campaign
- Aim/Objectives – clearly stated
- Evaluation Research - to identify needs and audiences
- Collaborating individuals/groups – inclusion of appropriate organisations
- Design of strategy - including audience segmentation, consider different approaches and timescales

Production
- Materials should be relevant and user-friendly
- Key individuals involved to 'front' where appropriate
- Plans for follow-up materials

Ongoing operation - need to update, continue with messages

Formative evaluation
- Feedback from initial work

Redevelopment
- Responding to any gaps or concerns not dealt with by the planned communication strategy new elements would be added

Outcome evaluation
- Methods to measure success, what will count as success

Collaborators

Context - what is the context for the communication strategy

[Taken from - The Campaign Analytic Framework described in Backer et al, 'Designing Health Communication Campaigns, 1992, pp16-17.]

Principles for what works

Use multiple media

Combine media and interpersonal strategies

Segment the audience

Provide simple, clear messages

Emphasize positive behaviour more than negative consequences

Emphasize current rewards not distant negative consequences

Involve key power figures and organisations

Take advantage of timing

Use formative evaluation

The importance of combining mass media and Interpersonal communication

- Mass media can raise awareness and increase knowledge, Flay & Bunton, 1990 argue that "...mass communication campaigns can only change knowledge, not attitudes, and certainly not behaviours.

- The addition of interpersonal communication to a strategy is essential for actual behaviour change (Backer et al, 1992).

- Mary Pentz, in Backer 1992, argues that a blend of the two levels of models should always be used, the interpersonal level where health ideas are diffused and the campaign model that is broader in aims and outcomes.

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