Audiovisual Health Communication

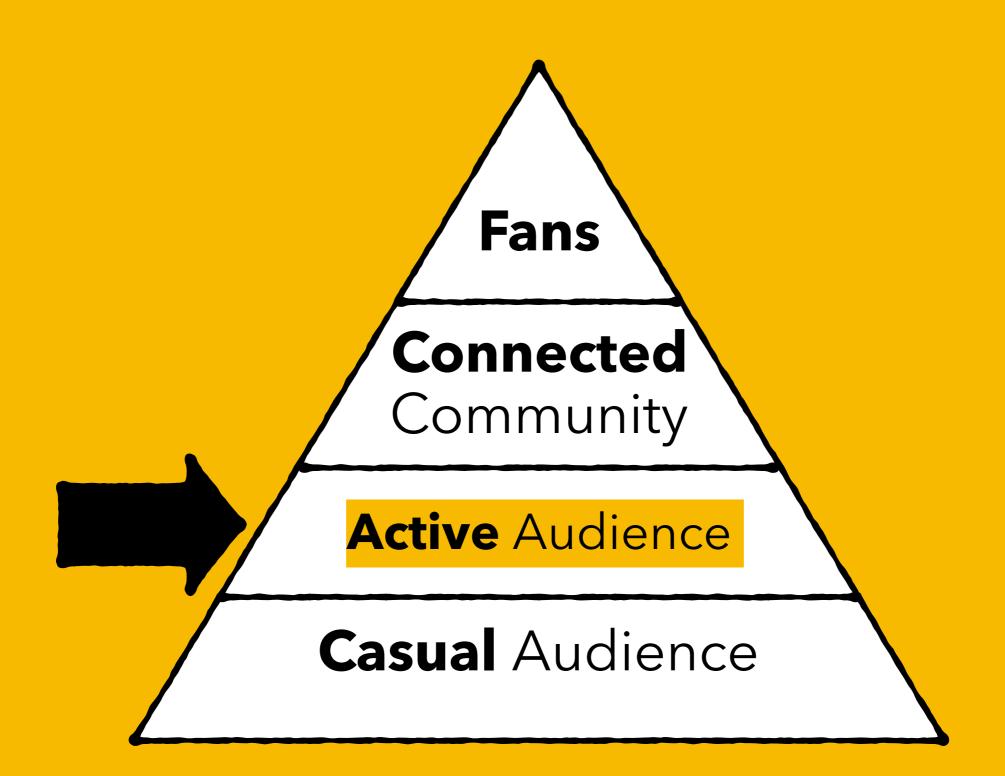
April Imam Prabowo dr., DTM&H, MFM(Clin)

Dept. Family Medicine & Public Health Faculty of Medicine and Health Sciences Universitas Muhammadiyah Yogyakarta

Introduction

Agreement

You will get: New knowledge and expanded horizon about health communication



Chapter 1 Basics

Health Promotion Health Education Health Communication

"The study and use of communication strategies to inform and influence individual decisions that enhance health" - CDC -

GOOD **Communication** = **Creator of** CHANGE

Involves: Social marketing Psychology Behavioral science

Target: **ATTENTION**

Technique 1: STRATEGIC

Technique 2: **PERSUASIVE**

Emotions: Anger Disgust Fear Happiness Sadness Surprise

Scopes: Individual Family Community Nation

Audience

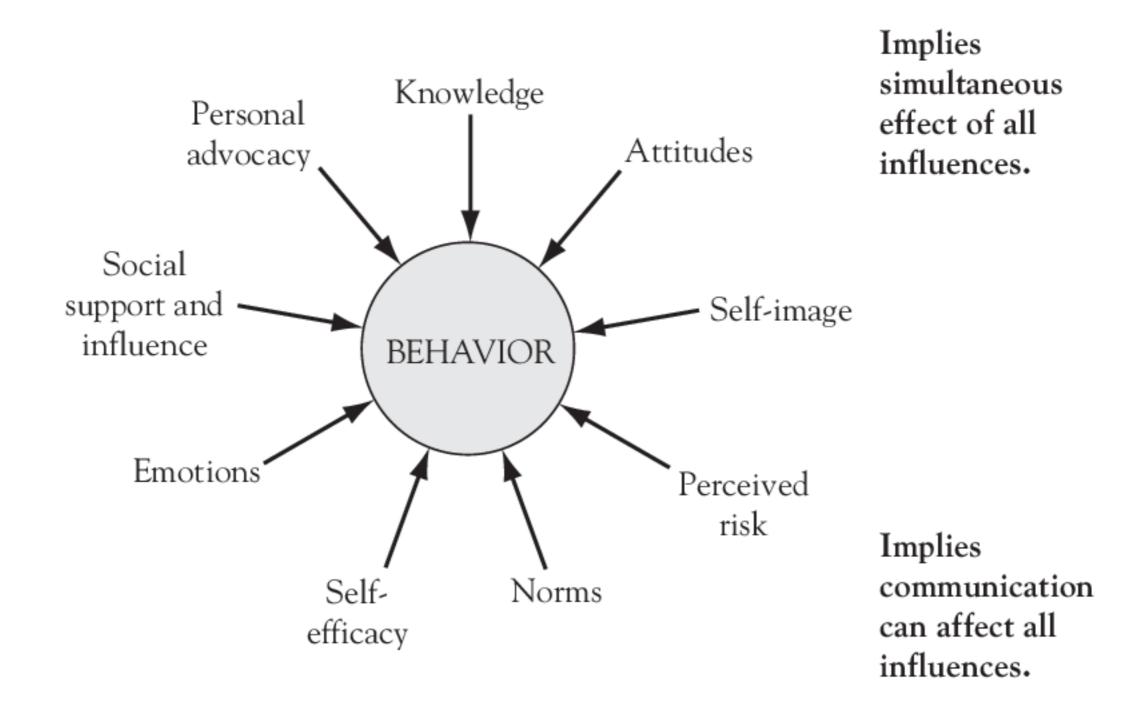
Health beliefs, attitudes, and behavior Cultural, age, and gender-related factors Literacy levels Risk factors Lifestyle issues Socioeconomic factors

Political Environment

Policies, laws Political willingness and commitment Level of priority in political agenda

HEALTH COMMUNICATION Recommended Health Behavior, Service, or Product Benefits Risks Disadvantages Price or lifestyle trade-off Availability and access

Social Environment Stakeholders' beliefs, attitudes, and practices Social norms Social structure Existing initiatives and programs



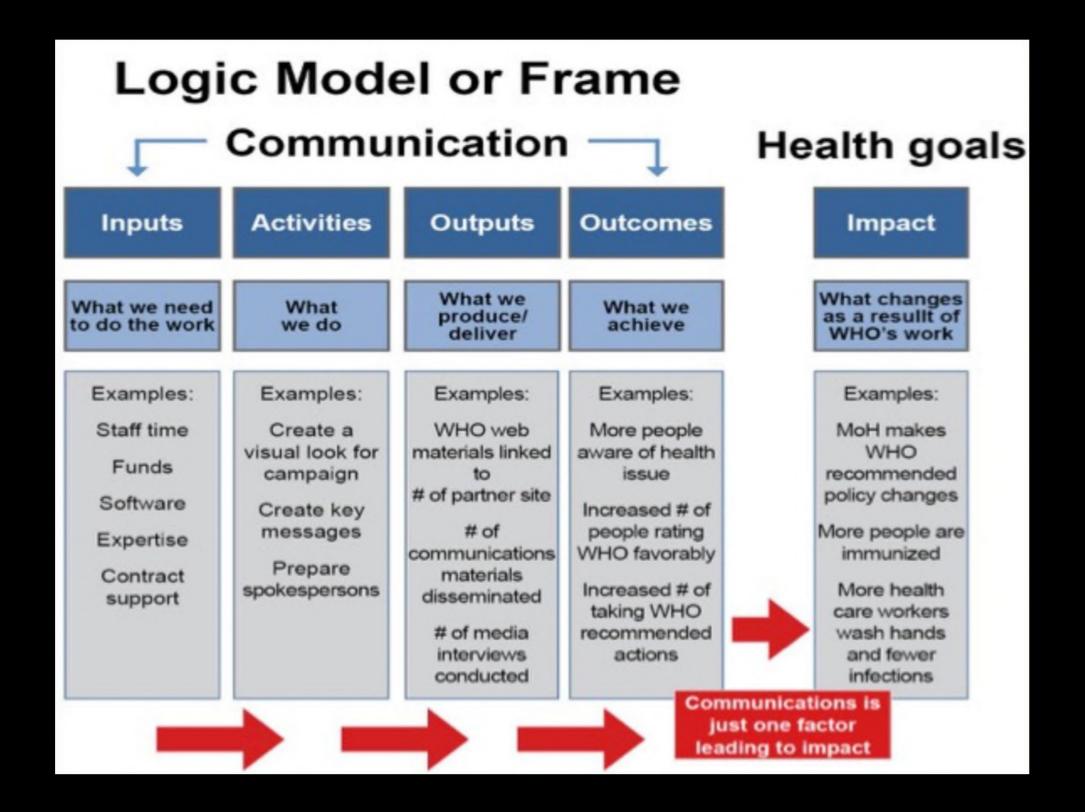
Source: (Schiavo, 2007 - Health Communication: From Theory to Practice)

Chapter 2 Frameworks/ Strategies

WHO Framework

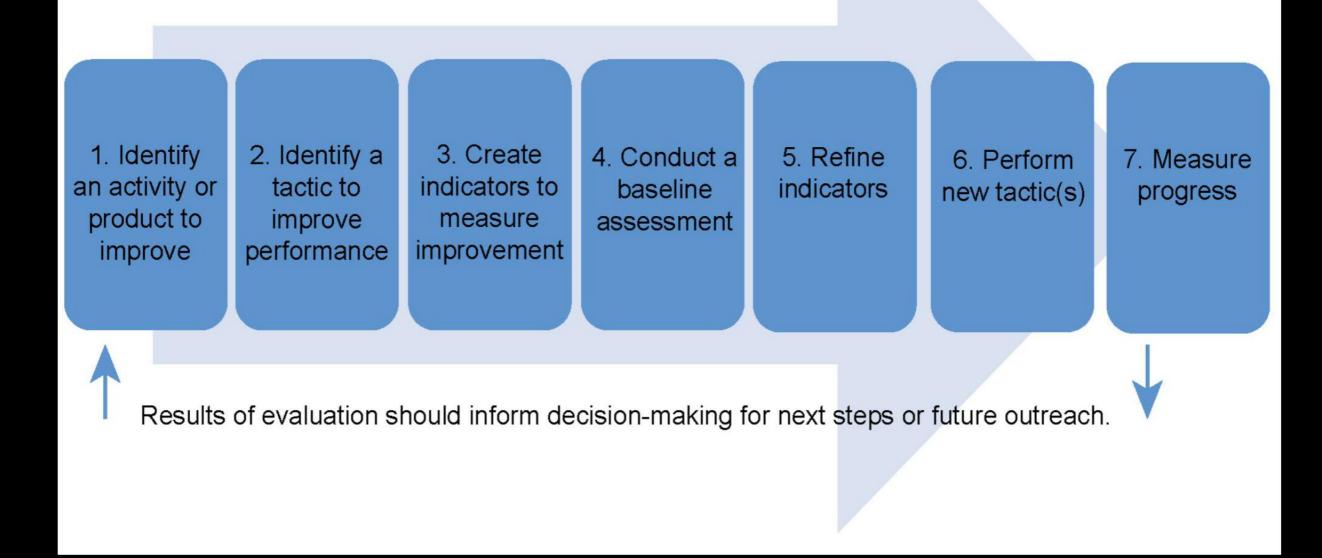


Source: WHO Strategic Communications Framework



Source: WHO Strategic Communications Framework

Evaluating principles of effective communication



Source: WHO Strategic Communications Framework

CDC Framework

1. Review background information

2. Set communication objectives

3. Analyze and segment target audiences

4. Develop and pretest message concepts

5. Select communication channels

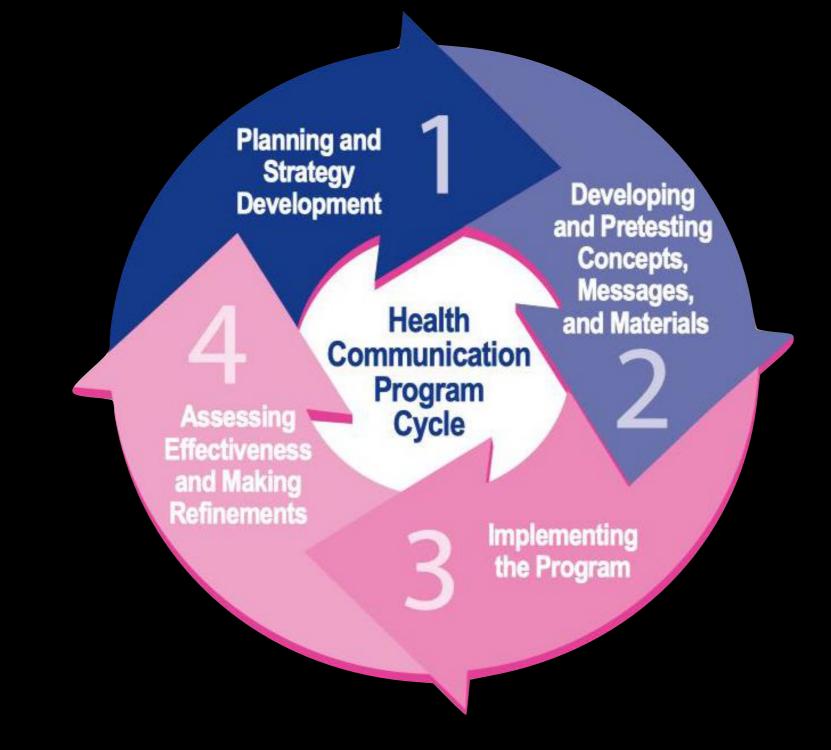
6. Select, create, and pretest messages and products

7. Develop promotion plan/ production

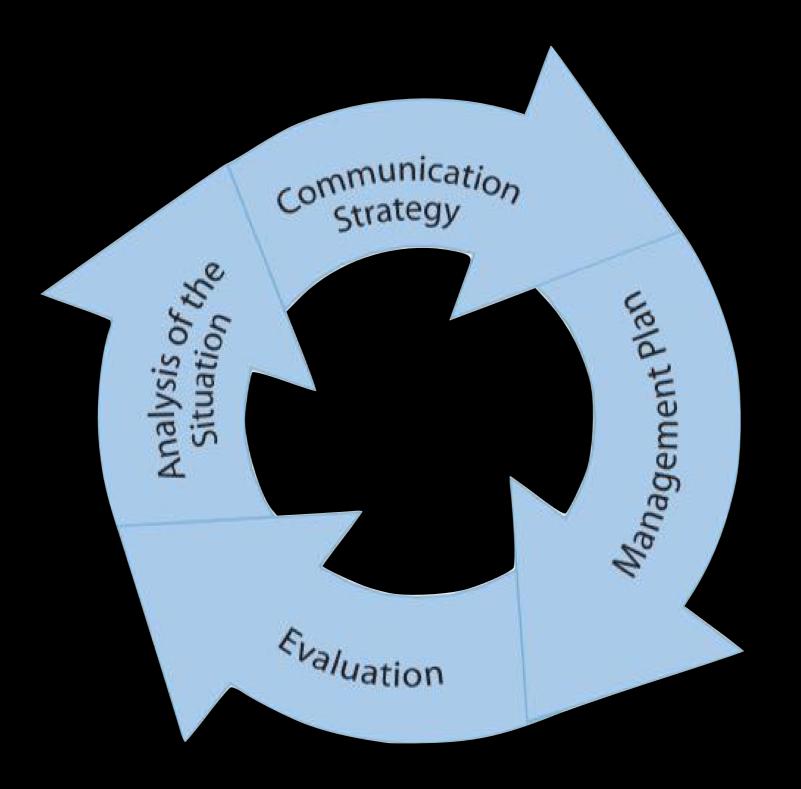
8. Implement communication strategies and conduct process evaluation

9. Conduct outcome and impact evaluation

NIH Framework



JHSPH Framework



Source: JHSPH

5Ps of Socia Marketing

Product Price Pace Promotion Policy

CDC Clear Communication Index

1. Include one main message statement

2. Put the main message first

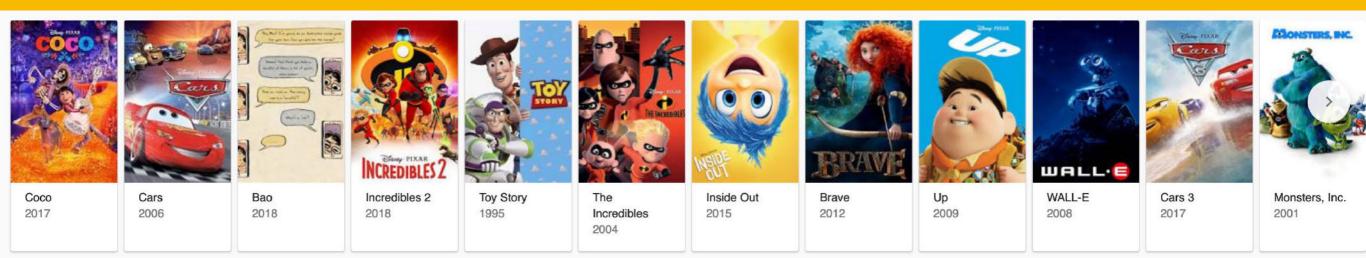
3. Use visual cues to emphasise the main message

4. Include a visual that conveys the main message

5. Include one call to action

6. Use active voice





6/22 Rules of Storytelling by Pixar

1. Great stories are universal

2. Great stories have a clear structure and purpose

3. Great stories have a character to root for (an underdog)

4. Great stories appeal to our deepest emotions

5. Great stories are surprising and unexpected

6. Great stories are simple and focused

Message Framing

Positive (gain) Neutral Negative (loss)

For all strategies: Begin with the end in mind.

Chapter 3 Audiovisual Channels

One sighted is worth a hundred words.

- Chinese Proverb -

Novie

Nusic Video

Public Service Announcement

Advertisement

Other Entertainment



Youtube Channel

Website & Social Media

News Outlet/ Channel

Exhibition/ Festival

Chapter 4 Samples

Movie An inconvenient truth

- Participant Media, Paramount Pictures -

https://www.youtube.com/watch?v=mOrHnctozrY

Movie Contagion

- Warner Brothers -

https://www.youtube.com/watch?v=uGeWspeMzFk

Movie Wit

- Avenue Pictures Productions, HBO -

https://www.youtube.com/watch?v=bROGmi93prk

Movie Inside Out

- Disney Pixar -

https://www.youtube.com/watch?v=yRUAzGQ3nSY

Music Video Usah Kau Lara Sendiri

- Katon Bagaskara feat. Ruth Sahanaya -

https://www.youtube.com/watch?v=dN24G1v_tJI



https://www.youtube.com/watch?v=ZDxzefttdQ8

PSA Jacob's Story -Autism Awareness

- Ad Council -

https://www.youtube.com/watch?v=J725SNWebKw

Ad Better You

- Apple -

https://www.youtube.com/watch?v=ms4yxJcvW3s

Conference The next outbreak? We're not ready | Bill Gates

- TED Talks -

https://youtu.be/6Af6b_wyiwl

Youtube Channel How pandemics spread



https://youtu.be/UG8YbNbdaco

Youtube Channel/Music Video LIVE: One world, #TogetherAtHome! #COVID19

- WHO, Global Citizen -

https://youtu.be/jGQT3YyE-n4

Chapter 5 Impacts

Case study: An Inconvenient Truth



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■ theconversation.com

Ten years on: how AI Gore's An Inconvenient Truth made its mark

THE CONVERSATION

Disiplin ilmiah, gaya jurnalistik

Bisnis + Ekonomi Kesehatan Kota Pendidikan Politik + Masyarakat Sains + Teknologi Seni + Budaya Lingkungan Hidup

In English

Q Cari analisis, penelitian, akademisi..

Ten years on: how Al Gore's An Inconvenient Truth made its mark

Mei 30, 2016 12.54pm WIB

Has Al Gore's An Inconvenient Truth had much lasting impact in the ten years since it was released? EPA/AAP

\sim	Surel	
	Twitter	
f	Facebook	
in	LinkedIn	
	Cetak	

Ten years ago, An Inconvenient Truth opened in cinemas in the United States.

Starring former US vice president Al Gore, the documentary about the threat of climate change has undoubtedly made a mark. It won two Academy Awards, and Gore won the 2007
Nobel Peace Prize for his efforts to communicate human-induced climate change.

An Inconvenient Truth (AIT for short) is the <u>11th-highest-grossing documentary</u> in the

Penulis



John Cook Climate Communication Research Fellow, Global Change Institute, The University of Queensland

Pengungkapan

Source: <u>https://theconversation.com/ten-years-on-how-al-gores-an-inconvenient-truth-made-its-mark-59387</u>



Source: <u>https://www.theguardian.com/film/2014/sep/21/inconvenient-truth-</u>evolution-climate-change-film

An Inconvenient Truth Then and Now: What's Changed for Our Climate Since 2006? | Climate Reality

HELP US PRODUCE VITAL CONTENT LIKE 24 HOURS OF REALITY. BECOME A CITIZEN PRODUCER ightarrow





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JANUARY 17, 2017 | 12:00 PM

AN INCONVENIENT TRUTH THEN AND NOW: WHAT'S CHANGED FOR OUR CLIMATE SINCE 2006?

Here's what's changed for our planet since An Inconvenient Truth sparked a global movement against the climate crisis a decade ago.

An Inconvenient Sequel: Truth to Power will be released in theaters July 28, 2017.

Source: <u>https://www.climaterealityproject.org/blog/inconvenient-truth-then-and-now</u>

<u> </u>

Case study: The next outbreak? We're not ready | Bill Gates

There are alwalys **desireable** and **undesirable** outcomes.

Vex

Ξ

Bill Gates's efforts to fight coronavirus, explained

The Gates Foundation has emerged as a leader in the coronavirus response.

By Kelsey Piper on April 16, 2020 11:24 am



≡ Forbes

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EDITORS' PICK | 128,463 views | Apr 19, 2020, 02:29pm EDT

Bill Gates Is Now A Target Of COVID-19 Coronavirus Conspiracy Theories

Bruce Y. Lee Senior Contributor (i)

Healthcare

I am a writer, journalist, professor, systems modeler, computational and digital health expert, avocado-eater, and entrepreneur, not always in that order.





Perspective

Innovation for Pandemics

Bill Gates

May 31, 2018

N Engl J Med 2018; 378:2057-2060 DOI: 10.1056/NEJMp1806283



∔ ≡

Perspective

Responding to Covid-19 — A Once-in-a-Century Pandemic?

Bill Gates

February 28, 2020 DOI: 10.1056/NEJMp2003762 Chinese Translation 中文翻译

1HEVERGE

Ш

Bill Gates is now the leading target for coronavirus falsehoods, says report

Lies about Gates outpace 5G conspiracies

By Thomas Ricker on April 17, 2020 5:28 am



Case study: Audiovisual aids in healthcare setting

EUROPEAN JOURNAL OF GENERAL PRACTICE 2018, VOL. 24, NO. 1, 202–210 https://doi.org/10.1080/13814788.2018.1491964

SYSTEMATIC REVIEW



OPEN ACCESS Check for updates

Audiovisual aids in primary healthcare settings' waiting rooms. A systematic review

Christophe Berkhout^a (b), Suzanna Zgorska-Meynard-Moussa^a, Amy Willefert-Bouche^a, Jonathan Favre^a, Lieve Peremans^{b,c} and Paul Van Royen^b

^aDepartment of General Practice/Family Medicine, Lille University, Lille, France; ^bDepartment of Primary and Interdisciplinary Care, University Antwerp, Antwerp, Belgium; ^cDepartment of Nursing and Midwifery, University Antwerp, Mental Health Research Group, Vrije Universiteit Brussel, Brussel, Belgium

KEY MESSAGES

- Primary care practices make use of their waiting rooms to display many sorts of audiovisual aids (AVAs) to educate or sensitize patients.
- AVAs using screens (TVs, computers, tablets, and smartphones) might improve patients' knowledge but the size of the effect seems to be small and not necessarily relevant.
- No robust demonstration of a change in health behaviour led by AVAs was found.

ABSTRACT

Background: Health promotion is part of GPs' commitments. Some waiting rooms have therefore been implemented with audiovisual aids (posters, pamphlets or screens) for health promotion purposes. Few studies have assessed the effect of audiovisual aids in primary care.

Objectives: To identify, describe and appraise studies that have investigated the effects of audiovisual aids on health promotion in primary healthcare waiting rooms. To determine which factors influence this impact through literature review.

Methods: Systematic review. Two independent researchers using predefined keywords searched databases. Additional publications were extracted from the reference lists of the selected articles. The selection of the articles was performed on the title and abstract, followed by complete reading and assessment. Bias and level of evidence were analysed.

ARTICLE HISTORY

Received 27 August 2017 Revised 7 June 2018 Accepted 13 June 2018

KEYWORDS

Primary healthcare; health promotion; patient education as topic; waiting room; audiovisual aids

Case study: Framec message

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BMJ Open Comparing responses to differently framed and formatted persuasive messages to encourage help-seeking for depression in Japanese adults: a crosssectional study with 2-month follow-up

Machi Suka, Takashi Yamauchi, Hiroyuki Yanagisawa

nauchi T, ABSTRACT

Objective To examine audience's responses to differently framed and formatted persuasive messages in the context of developing depression help-seeking messages.

Design Cross-sectional followed by 2-month follow-up study.

Setting and participants A web-based survey was conducted in July 2017 among Japanese adults aged 35-45 years. There were 1957 eligible respondents without psychiatric history. Of these, 1805 people (92.2%) completed the 2-month follow-up questionnaire. Main outcome measures Six depression help-seeking messages were prepared with three frames (neutral, loss and gain framed)×2 formats (formatted and unformatted) Participants were asked to rate one of the messages in terms of comprehensibility, persuasiveness, emotional responses, design quality and intended future use. Helpseeking intention for depression was measured using vignette methodology before and after exposure to the messages. Subsequent 2-month help-seeking action for their own mental health (medical service use) was monitored by the follow-up survey.

Results The loss-framed messages more strongly induced negative emotions (surprise, fear, sadness and anxiety), while the gain-framed messages more strongly induced a positive emotion (happiness). The message formatting applied the Centres for Disease Control and Prevention Clear Communication Index, enhanced the emotional responses and increased the likelihood that the message will be read. The loss-framed formatted message alone had a significantly greater OR of having help-seeking intention for depression compared with the neutral-framed unformatted message as a reference group. All messages had little impact on maintaining help-seeking intention or increasing help-seeking action.

Conclusion Message framing and formatting may influence emotional responses to the depression helpseeking message, willingness to read the message and intention to seek help for depression. It would be recommendable to apply loss framing and formatting to depression help-seeking messages, to say the least, but further studies are needed to find a way to sustain the effect of messaging for a long time.

Strengths and limitations of this study

- This study represents the first attempt to compare audience's responses to six depression help-seeking messages with three frames (neutral, loss and gain framed)×2 formats (formatted and unformatted).
- The 2-month follow-up survey was conducted to monitor changes in help-seeking intention and action after exposure to the messages.
- This study relied on self-reported information. It is almost impossible to eliminate the information bias completely.
- The study participants were limited to 35–45 years old selected from a nationwide panel of a research company. It is uncertain whether the messages will work equally well in other age groups or in other settings.

INTRODUCTION

Mental disorders are the leading cause of disability worldwide, accounting for 21% of all non-fatal burden.¹ Failure and delay in initial treatment contact for mental disorders have been recognised as an important public health problem.² ³ A systematic review and meta-analysis revealed that negative attitudes towards mental illness and help seeking are associated with less active help seeking in the general population.⁴ There is a possibility that interventions for improving people's attitudes and intentions towards help seeking could facilitate access to mental health-care, in addition to those targeting people's behaviours itself.

A number of public health programmes have been launched to eliminate negative attitudes towards mental illness and help seeking to facilitate access to mental healthcare.⁵ Communication is one of the components necessary for effective public health

To cite: Suka M, Yamauchi T, Yanagisawa H. Comparing responses to differently framed and formatted persuasive messages to encourage help-seeking for depression in Japanese adults: a cross-sectional study with 2-month follow-up. *BMJ Open* 2018;8:e020823. doi:10.1136/ bmjopen-2017-020823

 Prepublication history and additional material for this paper are available online. To view these files, please visit the journal online (http://dx.doi. org/10.1136/bmjopen-2017-020823).

Received 26 November 2017 Revised 26 July 2018 Accepted 14 September 2018

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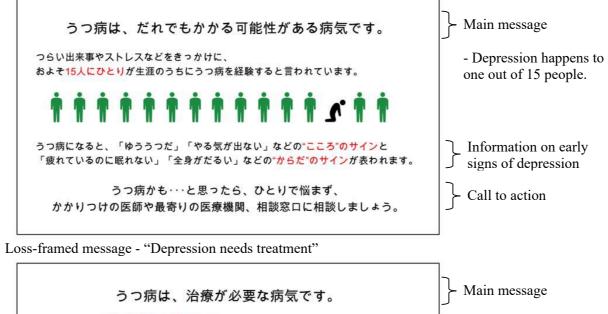
and Environmental Medicine, The Jikei University School of Medicine, Tokyo, Japan

Correspondence to

Dr Machi Suka; suka@jikei.ac.jp

Appendix A. Depression help-seeking messages (formatted versions)

Neutral-framed message - "Depression can happen to anyone"



- If not treated, 80% cannot recover from depression.

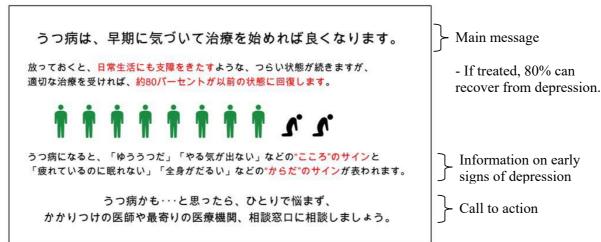
 \succ Call to action

うつ病になると、「ゆううつだ」「やる気が出ない」などの"こころ"のサインと 「疲れているのに眠れない」「全身がだるい」などの"からだ"のサインが表われます。

うつ病かも・・・と思ったら、ひとりで悩まず、 かかりつけの医師や最寄りの医療機関、相談窓口に相談しましょう。

放っておくと、日常生活にも支障をきたすような、つらい状態が続きます。 適切な治療を受けなければ、約80パーセントが以前の状態に回復しません。

Gain-framed message - "Depression improves with treatment"



Chapter 6 Exercise

Find a PSA that inspired you, and tell your story.