e-HEALTH LITERACY MANUAL

e-LYTE

2022

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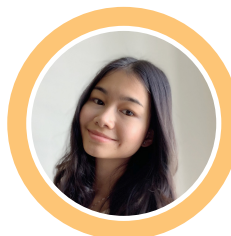Philippines

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ABOUT THE MANUAL

e-Lyte is a one-stop toolkit that aims to guide organizations and individuals with health-related backgrounds on how to create and design effective health literacy materials that serve their target audience. In order to optimize the impact of social media on health promotion, e-Lyte focuses on equipping content creators with necessary knowledge and skills to make better use of their unique position and existing platforms of health communication. Ultimately, this facilitates a more informed choice for their target audience about their individual and collective well-being.

To ensure the quality of this manual and boost the confidence of its users, our team ensured that e-Lyte is consensus-driven and validated by experts and advocates in the field. Our project is further supported by the U.S. Embassy in Hanoi and the Institute of Population, Health and Development under the YSEALI Enhancing ASEAN Human Capital in Health Program.

A one-of-its-kind manual that integrates health literacy and social media, e-Lyte may seem quite a handful to some, so we recommend that you pace yourself as you digest its contents. You can start with concepts foreign to you or with a step which you think your present health campaign is at. We also made sure that the manual is presented in a way that adheres to the principles we teach here: scientific, engaging and impactful.

Health Literacy Simplified.

FOREWORD

During the COVID-19 pandemic, it has become apparent that social networking platforms such as Twitter, YouTube, TikTok, Facebook, and others served significant roles in providing and exchanging health information. But while the digital world has provided faster and easier access to health resources, on top of the digital divide, two things remain uncertain: the health literacy of its intended users and the regulation of the quality of health information that reaches them.

Organizations and individuals in the health field play a big part in bridging these gaps. They have a key role in health stewardship, resource mobilization for community participation, the generation, utilization and management of scientific knowledge, and capacity development.

This group of people are also best positioned to improve the public's understanding of complex health information by adopting a more user-friendly communications style. Imagine what might happen if they produce health materials that are written the way most people speak—with words that many could read and understand, in languages with illustrations that speak to their countries of origin, levels of education, and cultures, and in ways responsive to people's functional difficulties or their impairments—all while leveraging the power of social media.

Yet, it seems, much is left to be desired with the state of e-health literacy around us. Many people still fall victim to false information. Many of us in the health field still seem quite disconnected from the basic principles of e-health literacy and social media management, which leads to a blend of health materials that are unengaging and without clear goals, visual storytelling, and persuasive appeal. Thus, this becomes a lost opportunity for us to reach out to our intended audience to influence their awareness and behavior, and ultimately, lose our intended impact. With Team e-Lyte's diverse yet relevant expertise and experiences, we hope to address this gap through this initiative.

TABLE OF CONTENTS

WHAT IS E-HEALTH LITERACY?

When we look at e-health literacy, we first need to understand the definition of health literacy.

There are varying definitions of such term in the literature. After all, health literacy is a complex phenomenon that involves individuals, families, communities and systems. By definition, **health literacy** is the degree to which individuals have the **capacity to obtain, process, and understand basic information and services needed to make appropriate decisions regarding their health** (Nielsen-Bohlman, 2004, p. 32)

On the other hand, **e-health literacy** is the **ability to seek, find, understand, and appraise health information from electronic sources** and **apply the knowledge gained to addressing or solving a health problem** (Norman and Skinner, 2006)

The need for people to be health-literate is now greater than ever as health information and medical care have grown increasingly complex with rapid technological advancements.

With this growth, are we doing our part in ensuring that the public is able to read texts, use information technology, and appraise online content to make better health decisions?

Search **PREGNANCY AND VACCINE**

Immunisation against SARS-CoV-2 with mRNA vaccines remains the most effective way of preventing COVID-19-related morbidity and mortality. Medium-term data show that the efficacy of mRNA vaccination (two doses) is robust for up to 5-6 months, as supported by immunogenicity studies.

Thereafter, the effectiveness of mRNA vaccines diminishes, and booster doses have been recommended for various high-risk groups. In 2021, the American College of Obstetricians and Gynecologists recommended booster doses for pregnant and post-partum women on the basis of their increased risk of COVID-19-related complications.

However, data on the durability of immune response in pregnant women are scarce

In the short term, poor e-health literacy is easily brushed off by the public. The impact seems small at that time. For example, while reading an article about vaccination and pregnancy, a woman stumbles across so many medical jargons. The confusion of these terms starts to fuel her doubts and she no longer wants to take the vaccination or clarify with a doctor.

I CAN'T READ WHAT'S ON THE LABEL. I'LL JUST READ OFF THE INTERNET FOR THE DOSING TO TAKE 2 TABLETS

Medicine A
Take 1 tablet
3 times a day

What about an elderly patient who struggles to read her medication label? Living alone, she does not want to trouble her children who stay far away. Instead, she looks to the Internet for the usual dosing of the medication. She did not realize that what was recommended online was different from her actual regimen.

The **ripple effect of limited e-health literacy can translate into poor health outcomes**, such as low participation in screening programs, poorer uptake of vaccinations, and low adherence to treatments.

What if the pregnant woman was diagnosed with the COVID-19 virus and passed on because she was still contemplating whether to take the vaccine? What if the old lady who was not able to interpret the dose recommendations from the online sources overdosed and now suffers from a coma?

Ultimately when we look at the **long-lasting impact of lack of e-health literacy**, we are looking at a **potential loss of life** due to risky behavior from misinformed decision-making about our health.

There are many factors that contribute to an individual's e-health literacy:
- person's presenting health issue
- time of the e-health encounter
- motivation for seeking the information
- technologies use
- complexity of the information being presented
- cultural factors that may influence decision-making

With the inclusion of technology in the delivery of health materials, accessibility and suitability of technology to its users pose challenges.

So we need to ask ourselves why e-health literacy and what role does it play in the health system?

In this age of the Internet, health literacy has taken a new form as people are increasingly shifting away from traditional health information sources to look for diverse resources online. This led to the concept of electronic health literacy or **e-health literacy**. Norman and Skinner (2006) first defined it as the ability to search, locate, and evaluate health information from electronic resources to solve health problems. They divided e-health literacy into six core competencies:

3 MEDIA LITERACY

The ability to select, understand, evaluate, and create information in the form of media
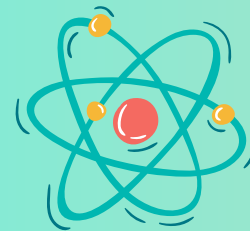
4 INFORMATION LITERACY

The ability to acquire, understand, evaluate, and apply health information to make decisions related to maintaining or promoting health

5 SCIENTIFIC LITERACY

The ability to use scientific methods to understand, evaluate, and explain health-related problems
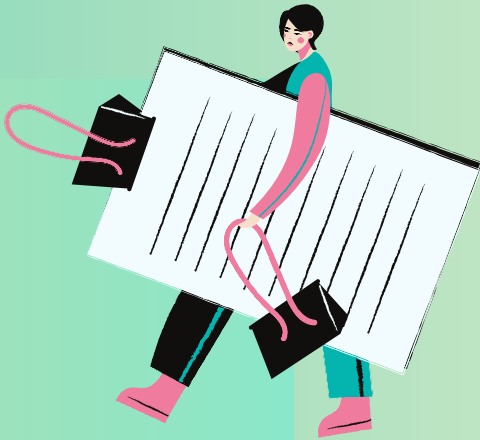
SIX CORE COMPETENCIES

1

TRADITIONAL LITERACY

Basic reading, understanding, communication, and writing skills

2

HEALTH LITERACY

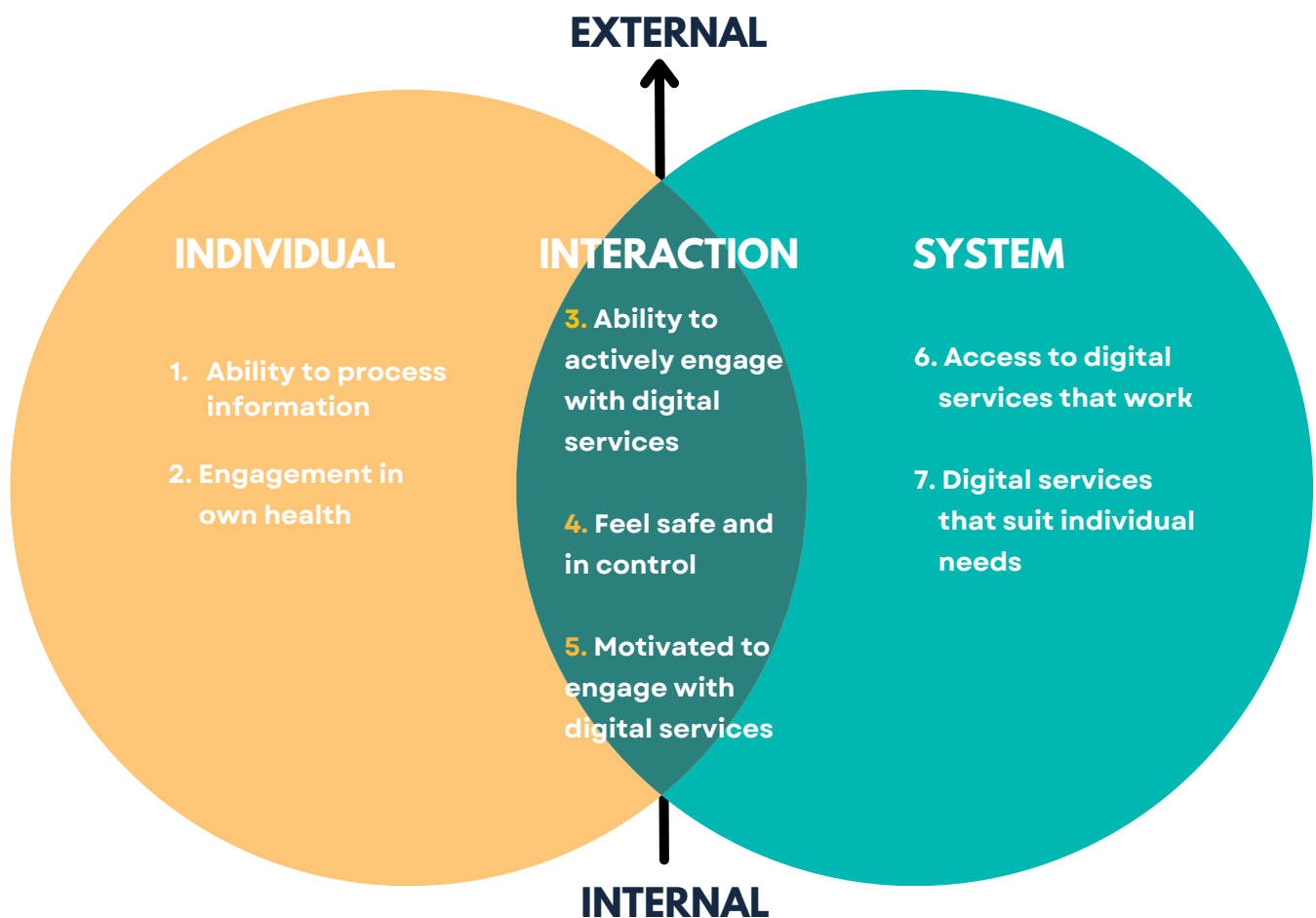The ability to access, evaluate, and use information

6

COMPUTER LITERACY

The ability to solve problems with computers

OF e-HEALTH LITERACY

Figure 1 illustrates the e-health literacy framework developed by Norgaard and colleagues (2015). The first two domains concerning ability to process information (**domain 1**) and engagement in own health (**domain 2**) are largely dependent on the competencies of the individual. Access to working systems (**domain 6**) and a system's ability to suit individual needs (**domain 7**) depend mainly on the characteristics of the e-health systems.

The interaction between the individual and the system is where aspects of e-health literacy begins. How a person might engage with information in the context of a system (**domain 3**) is dominated by more than just technical skills. Experiencing safety and control (**domain 4**), benefit and comfort, and having the right attitude in approaching technology (**domain 5**) become just as relevant.

EXTERNAL

INDIVIDUAL

1. Ability to process information

2. Engagement in own health

INTERACTION

3. Ability to actively engage with digital services

4. Feel safe and in control

5. Motivated to engage with digital services

SYSTEM

6. Access to digital services that work

7. Digital services that suit individual needs

INTERNAL

Figure 1. e-health Literacy Framework (Norgaard et al, 2015)

"

Improving literacy is a process that requires coordinated remediation and education, involving partnerships among patient-clients, practitioners, educators, and community health organizations over time.

It is as much a process as it is an outcome **(NORMAN AND SKINNER, 2006)**.

"

THE ROLE OF HEALTH ORGANIZATIONS IN HEALTH LITERACY

Health-related organizations are at the forefront of health education. As agents of science, they are expected to use evidence-based strategies in providing high-quality primary interventions.

Pursuing the goal of improved health literacy requires continuous efforts from such groups. There is a need for them to ensure the effectiveness and accuracy of any initiative, including enhancing the public's reach and understanding of complex health materials.

Health organizations have to work closely with relevant stakeholders and engage communities to find evidence-based health literacy practices and interventions to provide accurate and actionable health information.

By implementing user-centred educational strategies for their target audiences—especially for those with limited health backgrounds—for them to understand health resources easily and meaningfully, health organizations can help close disparity gaps on health awareness one impactful health material at a time.

# SOCIAL MEDIA USE IN SOUTHEAST ASIA

482.73 MILLION

are social media users in Southeast Asia

A report by Statistica Research Department reveals that Southeast Asia accounted for 482.73 million social media users in 2022. With a large population of active social media users, Facebook is the most popular social media platform in all Southeast Asian countries, with the highest share in Timor-Leste at 99.56 percent (Statista, 2022). Other platforms such as YouTube, Twitter, Instagram, and Pinterest also have crucial shares in Southeast Asia markets in 2022. In addition, the COVID-19 pandemic has brought an additional 70 million digital consumers in the region. Worldwide, the average daily time spent using social media is 2 hours 27 minutes.

SOCIAL MEDIA HEALTH COMMUNICATION CAMPAIGN
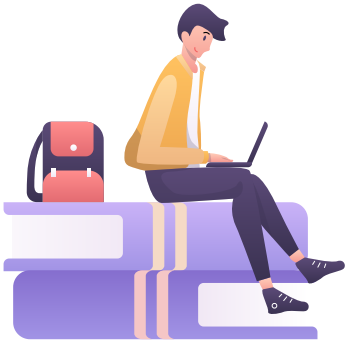
Social media health communication campaign refers to purposive strategies to deliver messages that aim to influence health behaviors of target audiences within a specific timeframe through social media networks.

With the increasing demand to rapidly facilitate health information-sharing to a broader and more diverse audience, **social media is being used to support a wide variety of health issues**, from aiding suicide prevention to communicating the risks of heart disease while also facilitating dialogue for public health community members (Hughes, 2010).

However, we must also understand that while social media is a convenient and open source for information, there are challenges that affect the effectiveness of our social media health campaign. After all, the topic of health may not necessarily be the most interesting topic to someone as compared to catching up with the latest trend on TikTok.

Thus, understanding the mechanics of a social media health campaign is important in knowing how we can best engage our target audience. **An effective social media health campaign not only increases public participation but is able to establish strong engagements that will eventually lead to positive behavior change.**

SUMMARY OF STEPS

ANALYZE AND SEGMENT YOUR AUDIENCE

BEGIN WITH THE BASICS

DEVELOP THE KEY MESSAGE CONTENT

2

1

3

EVALUATE YOUR CAMPAIGN

DEVELOP A BRAND IDENTITY

10

4

COLLECT FEEDBACK FROM USERS AND REVISE MATERIAL

DEVELOP VISUAL DESIGN FEATURES

9

5

8

6

7

PERFORM INTERNAL QUALITY CONTROL

MANAGE YOUR SOCIAL MEDIA ACCOUNT

ENGAGE YOUR USERS

STEP 1

BEGIN WITH THE BASICS

The promise of doing an online health communication campaign can be quite inspiring but difficult to kick-start; that is, too many good ideas but too little groundwork. Without the right mindset and preparation, your campaign, no matter how bold its vision, is doomed to fail or land on deaf ears.

Here is how we can prevent that from happening.

STEP 1A:
FIND OUT WHAT HEALTH ISSUE YOU ARE ADRESSING

Conducting a **situational analysis** is the process of **collecting systematic information to understand and identify a health issue**. It examines not only the current situation of the health issue but also the social, economic, political, and health context in which the health issue exists (How to Conduct a Situation Analysis | The Compass for SBC, 2015).

Why conduct a situational analysis ?
- Provides a **direction** for the online health promotion campaign
- Enables you to see and **think about the issue from all angles**
- Provides you **more information about the barriers or opportunities** of the health issue or health behavior

A complete situational analysis gathers information on the following four areas:

- The problem
- Its severity and causes

- The people affected by the problem (potential audiences)

- The broad context in which the problem exists

- Factors preventing or facilitating behavior change

Step 1A. 1. Identify the Health Issue

Think about a health issue that:

- needs to be addressed in your particular geographic area
- most heavily impacts a population
- has high levels of mortality and morbidity rates

Example: e-Health Literacy, Suicide cases, Depression, Family planning

Step 1A. 2. Identify the Primary Source of a Problem

Conduct a **Root Cause Analysis** to identify the primary source of the health problem that should be addressed to reach the vision:

- **Identify Possible Causal Factors**
  - Brainstorm by asking "why?"
  - Think of the sequence of events that led to the health problem
  - Think of what other co-existing problems might contribute to the main problem

- **Identify the Root Cause**
  - Continue to ask "why?" and try to understand the depth of the causes
  - Identify a root cause that is within the organization's influence or control

- **Identify Communication Challenges**
  - Find out which root causes are challenges that health communication is able to and should address

- **Prioritize Communication Challenges**
  - Prioritize by looking at the potential impact of addressing the communication challenge, and weigh the potential health outcome to be achieved
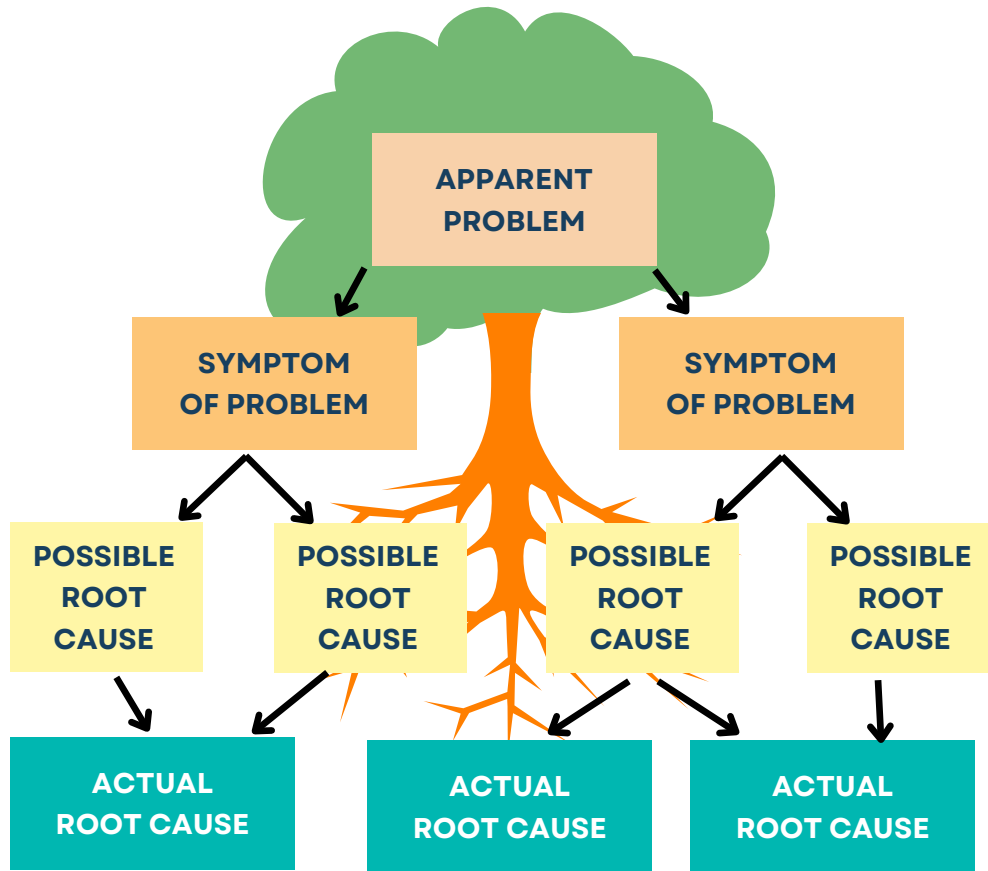
Figure 2. Root Cause Tree (Source: Johns Hopkins University Center for Communication Programs)

Example of use of Root Cause Analysis can be found at
https://www.thecompassforsbc.org/how-to-guides/how-conduct-root-cause-analysis

Step 1A. 3. Develop a Focused Problem Statement

- **Health issue:** Name the health issue and causes identified
- **Population:** Indicate who is affected
- **Timeframe, location and trend**: Describe when and where the problem was first observed and what kind of trend it is following.
- **Impact**: Quantify the extent of the health issue (cost, time, quality, personal, etc.)
- **Importance**: To the organization, the individual

Example: There is a low level of e-health literacy skills among the public. The current increase of the lack of health literacy causes impaired healthcare choices which in turn leads to poor quality-of-care.

STEP 1B:
CLEARLY SET YOUR DESIRED FUTURE

After identifying your health issue, draft a shared vision and define your goals and objectives. You can begin by asking:

- What are your organization's vision and mission?
- Does the health issue align with what your organization wants to achieve?
- Why is your organization active on social media in the first place?
- What are the outcomes you wish to see from the intervention?

Clearly defined objectives will help you to determine if social media can help you in meeting larger communication goals. Once you have gotten your big-picture goals figured out, it is time to outline the nitty-gritty part of it. According to Barre (2018), your goals have to be either:

- **SMART (Specific, Measurable, Attainable, Relevant, Time-bound)**
- **DUMB (Dream-driven, Uplifting, Method-friendly, Behavior-driven)**

S	Your goal should be clear and specific, answering what you want to accomplish, who's involved, etc.	**D**	It means dreaming big and being confident in your exciting and challenging ambitions.
M	Your goal should be something you can track and evaluate, like how much change you want to see, etc.	**U**	It has to be inspiring and it evokes positive emotions to give you the drive to achieve it.
A	Your goal should be realistic and achievable, answering the question "How can I achieve this?".	**M**	It should rely on plans and practices that serve as the roadmap to realizing your ambitions.
R	Your goal should matter and be worth doing, done at the right time and circumstance.	**B**	It means treating your goals as habits until they are embedded in your everyday life.
T	Your goal should have a target date to keep you focused and have something to work toward.		

It seems the SMART way is not the only way to set our goals.

Try doing both of them and see which kind of goal you like better. Remember that the goals you set should always reflect your organization's or your target audience's specific needs.

S	
M	
A	
R	
T	

Example: To increase the knowledge of our Facebook subscribers by as much as 50% on mental health disorders after 1 year of regular health education campaign

D	
U	
M	
B	

Example: To be the #1 most-trusted online source of health information in our city by curating relevant, credible, reader-friendly content on a daily basis, just before we finish our morning coffee

STEP 1C:
PREPARE YOURSELVES AND YOUR RESOURCES

Successful implementation of a campaign requires a certain level of openness and transparency about what you can and cannot do.

Step 1C. 1. Be frank in answering:

- Do you have the time to do it?
- Do you have the resources like budget, software, connectivity, etc.?
- Do you have the right skill sets such as research, writing, design, and evaluation?
- Do you have motivated people to do it from start to finish?
- Do you have defined roles in managing your social media campaign?
- Have you designated a channel manager to serve as the point of contact?
- Have you decided which social media platform is best for your goals?

Step 1C.2. You also have to be clear with the following:

As they will influence how you are going to move forward (Health Communication Unit, University of Toronto):

- Your theory or approach to health
  – biomedical, behavioral, socio-environmental?
- Your understanding of the relationship between theory and behaviors of individuals that lead to their actions

STEP 1D:
BUILD OR REVISIT YOUR HEALTH PROMOTION *STRATEGY*

In this step, the task is to identify the activities that will achieve your objectives and solve the health communication challenges from your root cause of problems. Clear strategies are essential to making things happen (Health Communication Unit, University of Toronto).

The POST method is a useful approach to help organizations personalize digital experiences and collaborate better on projects that involve multiple stakeholders. It is worth considering because it provides a systematic approach to turn goals into strategy, and it underscores the importance of putting people before technology.

So, consider P-O-S-T before you post!

Bernoff J. The POST method: a systematic approach to social strategy

What's the Goal?

P	**People.** This is where it all begins. Who are you looking to reach? Who is your primary audience? How do they behave online? (More on this later)	
O	**Objective(s).** What are you trying to accomplish? Are you trying to build followers? Create on-site engagement? Develop a sense of community? Raise funds? Create a call to action?	
S	**Strategy.** What will change if this effort is a success? Will more interaction be desired or expected? Will people promote an event or service on your behalf?	
T	**Technology.** Based on all of the above, what tools make sense? A single post per day? A dozen posts a week? Multiple social media platforms? A combination of things?	

How to Identify Strategies and Activities?

Step 1D.1. Brainstorm Potential Strategies

Brainstorm a list of possible health promotion strategies for each of the objectives developed in the previous section. The key question here is "**What do you need to do to reach the objective that is consistent with your health promotion philosophy and mandate?**" Include general population-based strategies as well as those that work with specific population(s) of interest.

Step 1D.2. Select the Best Strategies and Identify Specific Activities

For each objective, create a list of the major strategies, the specific activities for each strategy, the person implementing each one, the needed resources, and the corresponding success indicators. The activities have to be logically connected to their respective strategy. An example is provided on the first row of the table.

Health Communication Challenge	Top Strategies	Specific Activities for Each Strategy	Success Indicator	In-Charge
Inadequate reliable sources about vaccination	Create vaccination Q&A infographics	Gather top FAQs from online sources	A 10-item list of FAQ produced	John

STEP 2

ANALYZE AND SEGMENT YOUR AUDIENCE

Our theories about what works may be different for different populations. Segmenting and analyzing target populations' can lead to appropriate strategies that meet the needs of the population.

- Health Communication Unit, University of Toronto

STEP 2A:
IDENTIFY POTENTIAL AUDIENCES

- After conducting a situational analysis, you should have known a group of people affected by the health problem.
- Now, list all potential audiences that have an influence over the health problem.

HEALTH PROBLEM - Low levels of health literacy among the public

Potential Audience includes

- **Patients**
- **Caregivers**
- **Healthcare Professionals (HCP)**
- **Future HCPs**
- **Policy Makers**

STEP 2B:
SELECT PRIORITY AUDIENCES

- Understand that a priority audience is not necessarily the most affected audience by the health problem but it could be the group of people whose behavior must change in order to improve the health problem.
- You may have a few priority audiences at the same time, however, they may require different strategies.

Future HCPs: Because of the opportunity to introduce health literacy concepts before they practice in real-world settings, which can impact the public's levels of health literacy.

STEP 2C:
IDENTIFY PRIORITY AUDIENCE CHARACTERISTICS

Identify the socio-demographic, geographic, and psychographic characteristics of each priority audience to understand the population better.

One way to do this is by reviewing existing data or gathering new data (CDC). Anything you want to know about your target audience, you can put in a question format and submit to your social media followers and subscribers.

Socio-demographic	Demographic	Psychographic	Communication Channels	Other opportunities
• Sexual Orientation • Age range • Literacy level • Education • Job type • Language • Ethnicity • Religion • Income • Occupation • Household size • Community • Culture • Person With Disabilities	• Region • District • City • Urban • Rural	• Needs or concerns • Hopes and aspirations • Values • Interests • Motivation • Activities • Attitudes or opinions • Personality traits • Lifestyle	• Frequent vs occasional use • Use for general information • Use for health information Examples - Print, Radio, Television, Mobile phone, Social media	• Where audiences spend time • Activities audiences already participate in Examples - Community events, Health clinics, Health fairs, School events, Religious institutions

Table 1. Characteristics of each priority audience (Source: Audience Analysis by Compass)

STEP 2D:
UNDERSTAND YOUR AUDIENCE

When it comes to health information, the public wants to easily obtain two things: Knowledge of the health problem and how to take action. They typically do not stay very long on a page. This is challenging especially with online health campaigns.

Step 2D.1. Identify Knowledge, Attitudes, and Practices

We need to identify what the priority audience knows, thinks, feels and does about the health problem. This enables us to develop and tailor content or activities towards the audience's needs, beliefs, and behavior. Ask the following:
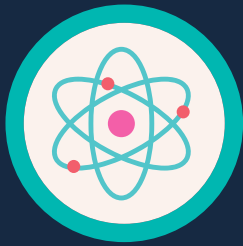
KNOWLEDGE
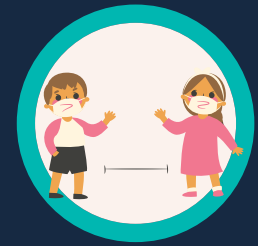What do they already know about the health problem?

ATTITUDE
How do they feel about the health problem?

RISK PERCEPTION
Do they feel at risk of having the problem?

SOCIAL NORMS
What are the beliefs and attitudes toward the health problem?

EMOTIONS
What emotional reaction do they have towards the health problem?

SOCIAL SUPPORT
What kind of support do they believe they would receive from the community?

SELF-IMAGE
How do they see themselves in the health problem?

PERSONAL ADVOCACY
How capable do they feel about discussing how to reduce the problem?

We can also deduce a **User Story**, a short description told by the users or audiences about what they desire from the content or campaign we are organizing. For example:
As a < type of user >, **I want** < some goal > **so that** < some reason >
As a HCP, I want to access literacy materials for deaf people to improve medication adherence.

Step 2D.1. Identify Barriers & Facilitators of Desired Health Outcome

Barriers	Facillitators
• Habit • Fear • Negative experience	• Accessibility • Availability • Affordability • Acceptability

Give it a try and fill out the table according to the health problem that you would like to address.

Priority Audience	Demographic & Psychographic Characteristics	Preferred Media	Other Opportunities	Current Behaviors	Knowledge, Attitudes & Perceptions	Barriers to Improved Behavior	Facilitators of Improved Behavior
Future HCPs	Urban and City Aged 20 to 40 Higher Education Healthcare background	Social Media Phone	University Institution Hospital or Health clinic	Conduct community projects	Wants to improve the public's health awareness on diabetes	Fear of delivering wrong content since no working exposure yet	Guidance from advisors No payment for conducting online health campaigns

Table 2. Audience Characteristics and Behavioral Factors Template
(Johns Hopkins University Center for Communication Programs)

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STEP 2E:
DO AUDIENCE SEGMENTATION IF NECESSARY

Audience segmentation is the **process of dividing large audiences into smaller groups of people.** It enables you to customize your promotional activities more accurately and responsibly to the individual user's needs and likings (Camilleri, 2017).

Audience segmentation is needed **depending on the situation, and if the organization has enough resources or manpower**. If the audience cannot be reached effectively with the same messages and medium then you may proceed with audience segmentation.

Here is a guide by Compass on how to conduct Audience Segmentation: https://www.thecompassforsbc.org/how-to-guides/how-do-audience-segmentation

STEP 2F:
DEVELOP AUDIENCE PROFILES

Now that you've got most of the information from the previous steps, you can create an audience profile or persona. It consists of information about current behaviors, motivation, emotions, values, and attitudes, as well as socio-demographic information. Here is an example:

- Yeo, a 23-year-old, digitally savvy Medicine student living in Laos
- His goal is to be a Urologist who advocates for Urology prevention, care and management
- He wants to launch a Urology Public Health Campaign but isn't sure about his capabilities, expertise and support from his peers
- He also is busy with other socio-civic projects

STEP 3

DEVELOP THE KEY MESSAGE CONTENT

It is important for our target audience to understand why the information is important to them and how they can make sense of the information that is disseminated.

STEP 3A:
DETERMINE KEY MESSAGE CONTENT

As an essential part of health communications strategy, the key message content must be structured and developed with inclusivity and cohesiveness. The following are parts of a key message. Think and ask yourself the following:

WHO

Who is the audience and what are their needs, motivations, and barriers to change?

ACTION

What action does the campaign want the audience to take?

BENEFIT

Why should the audience take the action?

Can you help Yeo identify three key messages for his Urology Public Health Campaign? His first content will be about Benign Prostate Hyperplasia (BPH).

1.
2.
3.

STEP 3B:
DRAFT KEY MESSAGES

Draft your key messages based on the following criteria. Each message should have one or two points. Keep it short and simple as possible. Include the benefit promised to the audience and the evidence which supports that.

Priority Audience	Audience Characteristics	Desired behaviour	Barrier	Message
Males aged 60 - 80 years old diagnosed with Benign Prostate Hyperplasia (BPH)	Patients are embarrassed to talk about their BPH encounters Needs validation from family and friends	Be comfortable and not have a negative stigma towards them	To be respected by their family and and be considered healthy; patients do not need to take their medications	There is nothing to be ashamed about having BPH

Key promise	Support points	Message
If you adhere to BPH medications you will carry on with life more comfortably	Adherence to BPH medications can control symptoms of BPH; Behavioral interventions can also relieve symptoms	With BPH medications and behavioral interventions, you are able to live life more comfortably

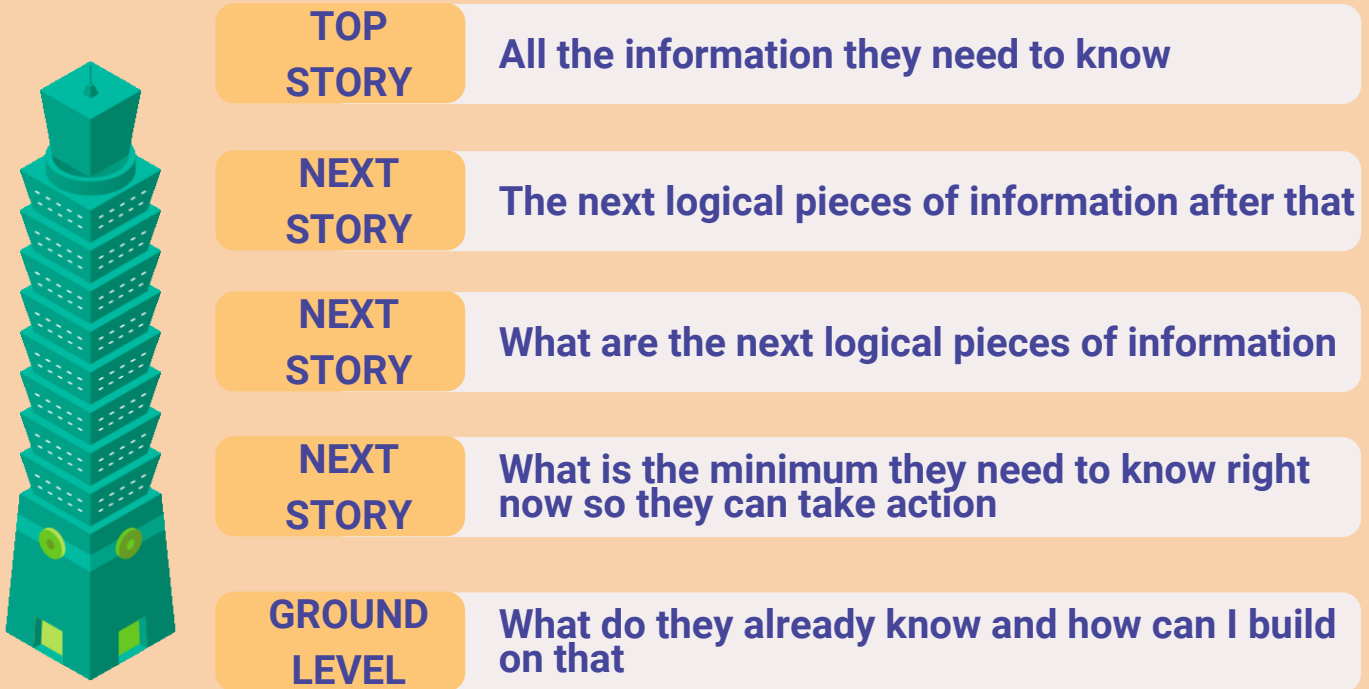# STEP 3C:
USE THE SCAFFOLDING TECHNIQUE

Scaffolding describes a type of assistance offered by a teacher or peer to support learning in classrooms. In this process, a teacher assists a student to master a task or concept that the student initially independently struggles with (West, Swanson and Lipscomb, 2019).

The teacher does this by **systematically building on students' experiences and knowledge as they are learning new knowledge or skills** (IRIS | Page 1: What Is Instructional Scaffolding?, 2021)

Similarly, scaffolding can be described as training wheels to a bicycle or a parent holding her hand of her baby when learning how to walk. Much like students, health information consumers require assistance when it comes to understanding complicated health materials; be it in spoken or written communication.

Scaffolding can be applied using the following prompts: (Supporting self-management: Combining health literacy and care planning, 2021)

TOP STORY	**All the information they need to know**
NEXT STORY	**The next logical pieces of information after that**
NEXT STORY	**What are the next logical pieces of information**
NEXT STORY	**What is the minimum they need to know right now so they can take action**
GROUND LEVEL	**What do they already know and how can I build on that**

This technique allows you to:
- Plan and organize health information for users based on their current needs
- Plan what information you want to give
- Plan what will work best for the user
- Plan the time you and the user have
- Plan the resources you have and what the user wants to know

One key thing to always keep in mind is the **WHY**. Why do you want to create this health material? Think about the health outcome you want to achieve and plan the content from there.

Scaffolding in design can look like building content based on a specific element. For example, the image of the bladder below is used to explain Benign Prostate Hyperplasia (BPH). The aim of the examples below is to disperse health information for patients to understand the importance of medication adherence and behavioral interventions in BPH.

FACTORS OF CHOICE
10

How do healthcare practitioners choose the therapy

Side effect of medications

Patient symptoms

Quality of life

BEHAVIOURIAL INTERVENTIONS
Ways to reduce discomfort

Avoid fluids at night

Reduce alcohol

Reduce caffeine

Do empty bladder x 2

TOP STORY

All the information they need to know

- Other behavioral interventions they can practice to reduce their symptoms
- Direct actionable steps are given to the patient

DRUG ACTION
06

How does each drug act

3

2

1

1. 5α-Reductase Inhibitor
- Reduce the size of the prostate gland
- Reduce the prostate volume
- Reduce the risk of urinary retention

2. Alpha Blocker
- Relax the muscle of the prostate and bladder neck
- allows urine to flow easily
- 1st line treatment

3. Anticholinergic agents
- relieve irritative symptoms related to overactive bladder

4. Combination

NEXT STORY

The next logical pieces of information after that

- Building on the same elements and marked parts, we can use it to explain how and where the medications act to relieve the symptoms and resolve the disease.
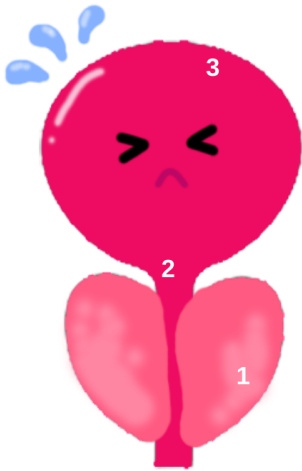
THE CAUSES

How the prostate enlarges

The brain send signals to the testes to increase the production of testosterone

1. 5α-Reductase Enzyme

- **Enzyme present in prostate**
- **converts testosterone to dihydrotestosterone DHT**
- **Cause prostate enlargement**

2. Constriction of muscles in bladder neck and prostate

- **Decrease urine flow**
- **Cause voiding symptoms**

Smaller storage space

- **Cause irritative symptoms**

3. Overactive bladder

NEXT STORY

What are the next logical pieces of information

- To understand how or where the medication acts, we first look at what causes BPH
- Using the bladder element, we can label each part by numbers 1,2,3 based on the causes of BPH.

SIGNS & SYMPTOMS

- **When BPH shows no symptoms, they don't need treatment**
- **BPH can lead to lower urinary tract symptoms (LUTS) which require treatment**

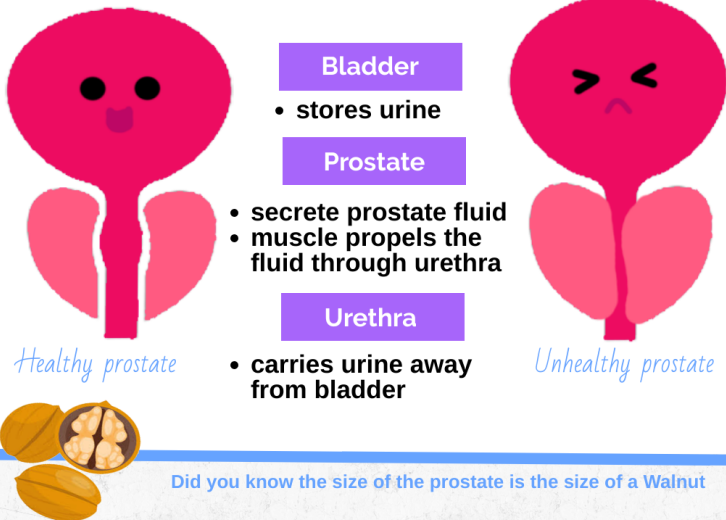| Irritative symptoms	Voiding symptoms
Urinary frequency	**Weak urinary stream or interrupted stream**
Nocturia - excessive urination at night	**Difficult to start urinating**
Urinary incontinence - Lack of voluntary control	**Bladder feeling full**
	Terminal dribbling - urine leak out

NEXT STORY

What is the minimum they need to know right now so they can take action

- What patients need to know now is how the medications can help relieve their BPH symptoms.
- This is so that they can adhere to the treatment to achieve a more optimal health outcome.

BENIGN PROSTATIC HYPERPLASIA

the enlargement of the prostate gland due to the cells rapidly multiplying hence causing urine flow blockage & uncomfortable urinary symptoms

Bladder
- **stores urine**

Prostate
- **secrete prostate fluid**
- **muscle propels the fluid through urethra**

Urethra
- **carries urine away from bladder**

Healthy prostate

Unhealthy prostate

Did you know the size of the prostate is the size of a Walnut

GROUND LEVEL

What do they already know and how can I build on that

- Patients know that urine is stored in the bladder.
- We can use the bladder visual element to build on the knowledge of BPH.

" Begin with the end in mind "

In the words of the famous Stephen Covey, author of The 7 Habits of Highly Effective People - **Begin with the end in mind**

Have in mind the end-product that you would want to influence first before planning the content.

STEP 3D:
SIMPLIFY COMPLEX HEALTH MESSAGES

In any health campaign, **one can never go wrong with clear communication using plain and simple language.** Take Australia's skin cancer campaign, 'Slip, Slop, Slap, Seek, Slide'. Simplification leads to greater public comprehension, improved health literacy, and thus improved health behaviors and outcomes. In general, the 'plain language' or 'clear and simple' imperative focuses on adjusting health messages at the word and sentence level. **The more 'readable' it is, the better** (Zarcadoolas, 2010).

Slip   Slop   Slap   Seek   Slide

Protect yourself in five ways from skin cancer

Figure 4. Example of an effective health infographic

However, surface-level language simplification as it is generally practiced in health promotion is not ideal for communicating complex information effectively. 'Simplified' texts are often not any more understandable, and in fact are often more difficult to understand (Zarcadoolas, 2010). Simplifying complex information can be made easier by using local languages.

Readability formulas are inadequate to assess communication effectiveness. These formulas are a mechanical "count" of syllables and sentences; they do not consider audience, purpose, or the majority of communication characteristics that contribute to clarity and comprehension (Baur and Prue, 2014).

A text becomes more understandable or 'decodable' when it has elements that allow the reader to interact with it. Cohesion and context are central to comprehension. Here is an example:

- **Text simplified poorly, without much cohesion**

Your nurse will give you a glucose tolerance test this month. She will check your blood sugar in your body. You can have too much blood sugar. Then your baby may be very big. The delivery could be harder.

- **Improved version** (no surface level language simplification)

Your nurse will give you a glucose tolerance test this month. This test is to check your blood sugar in your body. If you have too much blood sugar, your baby may be very big. A big baby could make the delivery harder.

Step 3D.1. How to Start

- **Go back to your knowledge about your audience**
  - Think of why your audience needs to read the material
  - Look at what you are writing from your reader's point of view
  - Consider your audiences literacy ability
- **Understand the topic you are creating a material for**
  - Follow Einstein's wisdom: "If you can't explain it simply, you don't understand it well."
- **Anticipate the questions and concerns of your audience**

Step 3D.2. How to Write Clearly   (Smith and Wallace, n.d.)

- **Active voice with strong verbs**
- **Short sentences**
- **Personal pronouns**
- **Concrete, familiar words**
- **No surplus words**
- **No legal or medical jargon**
- **When text includes a technical term, offer a simple explanation next to it**
- **Tabular presentation of complex information**
- **Use a design and a layout that increases comprehension**

Part of clear communication is to make sure the message is **inclusive and empowering**. How do we ensure that our messages do not use demeaning terminologies (i.e. 'normal people', 'homosexuals', 'handicapped'), and do not promote stereotypes, sexism, and racism?

You may find this reference on inclusive communication: **https://hawksem.com/blog/ways-to-create-inclusive-marketing-strategy/**, and on disability-inclusive communication: **https://epicassist.org/inclusive-messaging-matters-best-practices/**

Step 3D.3. How to Cut Down Lengthy Information?

Too much text can be overwhelming, especially to less-skilled readers. If the material is too long, **consider other ways to package it**. If you condense it, do not oversimplify or drop the examples and explanations that readers really need.

More importantly, **focus on your behavioral goals**. Is each information point fundamental to the reader understanding, accepting, and taking the desired action? Does each information point help to motivate a desired action?

One approach is to **separate need-to-know from want-to-know and want-to-tell**. Some, if not all, of the information in the second two categories can probably be safely eliminated. Tough decisions always remain. Pretesting can help determine what information the audience really needs (National Institutes of Health).

STEP 3E:
USE CREDIBLE SOURCES

In the wake of the COVID-19 pandemic, there has been a dramatic turn toward online sources of information.

But in a world where news or content can be reported by anyone with the internet or a cellphone, **how do you decide what is true and what is false?**

As health organizations, **how do you distinguish high-quality and credible sources from what are not?**

Fake infomation overlaps with other information disorders, such as misinformation—false or misleading information—and disinformation, which is false information that is deliberately disseminated to deceive people (Lazer et al., 2018).

According to Claire Wardle of First Draft one website, there are **seven types of mis- and disinformation**, which include parody; misleading content; imposter content; fabricated content; false connection; false context; and manipulated content.

FAKE

Amidst the fake news pandemic, here are a few reminders you can equip yourselves with as individuals and as an organization serving your intended audience.

Step 3E.1. Do the CRAP Test

Molly Beestrum developed a system known as the CRAP Test that can be used in deciding whether a website is a credible, valid source. The test considers four major website attributes: currency, reliability, authority, and purpose.

To apply Beestrum's test, ask the following questions:

CURRENCY
- **How recent is the information?**
- **How recently has the website been updated?**
- **Is it current enough for your topic?**

RELIABILITY
- **What kind of information is included in the resource?**
- **Is the content of the resource primarily opinion? Is there a bias?**
- **Does the creator provide references or sources for data or quotations?**

AUTHORITY
- **Who is the creator or author?**
- **What are the credentials? Can you find any information about the author's background?**
- **Who is the publisher or sponsor?**
- **Are they reputable?**
- **What is the publisher's interest (if any) in this information?**
- **Are there advertisements on the website? If so, are they clearly marked?**

PURPOSE
- **Is this fact or opinion? Does the author list sources or cite references?**
- **Is it biased? Does the author seem to be trying to push an agenda or particular side?**
- **Is the creator/author trying to sell you something? If so, is it clearly stated?"**

Principle 1: Science-Based

Sources should provide **information that is consistent with the best scientific evidence available at the time** and meet standards for the creation, review, and presentation of scientific content. Its attributes are the following:

- Acknowledges limitations and evolution of knowledge
- Clearly labels information with the date it was last updated and strives to reassess and update content
- Demonstrates subject-specific expertise
- Links to and is linked to by other credible sources
- Provides citations for information shared
- Synthesizes information from multiple sources
- Uses a consensus process to develop information shared
- Uses peer review or another form of content review to vet information before sharing

Principle 2: Objective

Sources should take steps to **reduce the influence of financial and other forms of conflict of interest or bias** that might compromise or be perceived to compromise the quality of the information they provide. Its attributes are the following:

- Keeps health information separate from financial, political and ideological messages
- Maintains independence from funders
- Separates lobbying activities from health information
- Does not include advertisements with relevant health information
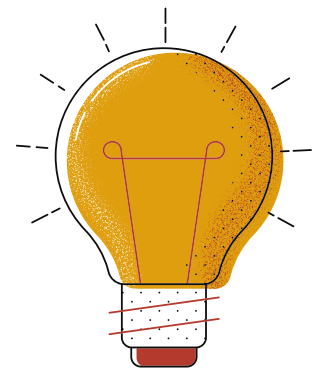
Principle 3: Transparent and Accountable

Sources should **disclose the limitations of the information they provide**, as well as conflicts of interest, content errors, or procedural missteps.

Scientific knowledge changes over time as more evidence becomes available and as existing evidence is analyzed in new ways.

Scientific evidence can never guarantee a certain outcome for every individual or every context.

Its attributes are the following:

- Discloses financial and non-financial conflicts
- Discloses relevant policy positions and lobbying activities
- Follows transparency policies
- Posts public corrections or retractions
- Provides a mechanism for public feedback
- Shares data, methods or draft recommendations

To help you in judging high quality, reliable information online, here are a few examples of health-related fact-checking websites:

- https://www.factcheck.org/scicheck/
- https://leadstories.com/
- https://healthfeedback.org/
- https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters
- https://toolbox.google.com/factcheck/explorer/search/coronavirus

Moreover, here are examples of credible websites for health information contents:

- **Academic Health and Medical Journals** – see list of all MEDLINE-indexed journals:
  https://www.nlm.nih.gov/bsd/serfile_addedinfo.html
  The National Library of Medicine (NLM), the world's largest medical library, uses stringent criteria to determine whether a journal should be included in MEDLINE.

- **Government Organizations** – National and local government organizations, such as the Department/Ministry of Health, operate under a number of provisions that support their credibility as sources of health information—primarily in the areas of transparency and accountability.

- **Accredited Nonprofit Organizations** – Because organizations must apply for reaccreditation on a regular basis (e.g., every few years), maintenance of accreditation indicates an ongoing commitment to transparency and accountability. These include educational institutions (universities and health professions schools), health care organizations, health plans, and public health departments.

Source: Kington, et al. (2021)
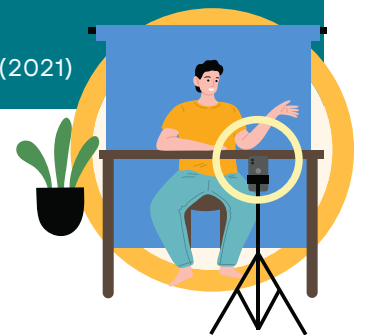
STEP 3F:
ORGANIZE CONTENTS LOGICALLY AND SYSTEMATICALLY

Aside from the aesthetic design of your online material, **think about your presentation of ideas, the grouping of similar concepts, highlights of key points, and creating summaries**. Pay attention to what people want to know, as well as what professionals think they ought to know.

Categorizing your social media posts can help you streamline your content and design. For example, you can create a design template for each category so your users can immediately recognize and differentiate the posted content. Categorizing will also **help your organization track which posts get the most reach and engagement** from your users. This insight will then help you tailor your succeeding strategies or posts. Here are some examples of categories:

- **Advisory** – summarized version of traditional official documents
- **Health Education / News** – includes basic scientific information on signs and symptoms of certain diseases, diagnostic tools, therapeutic updates, etc.
- **Inspirational** – materials which increase morale and motivation of your users
- **Cross-promotion** – contains links to external content
- **Organization Promotion** – includes posts about your organization's profile, achievements, services and programs, etc.
- **Fundraising** – involves strategies to gather voluntary financial contributions for a certain cause
- **Miscellaneous**

STEP 4

DEVELOP A BRAND IDENTITY

Given the clutter of campaigns and their messages in a saturated health consumer market, uptake and sustained use of health campaigns need alternative pathways to keep consumers interested and gainfully engaged with the products being offered. Branding, as a communicative strategy, can meet this need.
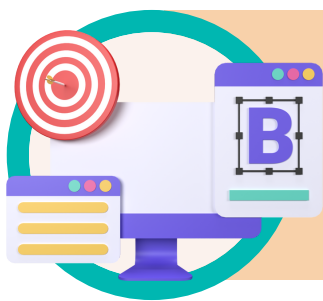
- Basu and Wang, 2009

When we talk about social media and targeted audiences, we must understand that not everyone who participates may engage. Higher engagement reflects more potential for the audience to play a more active role in the health information they are receiving. Audiences then may be empowered to adopt a positive health behavior.

The right branding can aid in this as brands have the potential to embody multiple behaviors and behavior change messages (Evans et al., 2008)

WHAT IS BRANDING?

Brands are **marketing tools that create mental representations in the minds of consumers about products, services, and organizations**. Branded campaigns promote a consumer orientation that emphasizes the nature of the exchange by appealing to the individual's self-interest (Blitstein et al., 2008).

Let's look at two important aspects of branding from a healthcare standpoint:

ORGANIZATION BRAND IDENTITY
- Important as the audience's first impression

PUBLIC HEALTH CAMPAIGN BRANDING
- Important to build a connection with target audiences to induce and sustain positive health behavioural change (Basu and Wang, 2009)

ORGANIZATION BRAND IDENTITY

STEP 4A:
LIST DOWN AND DEFINE YOUR VALUES

A brand can be described as the personality of the organization. If your organization were a person, what adjectives would describe it?

Begin by listing values and then define how the organization applies those values through its operations. The mission and values should drive every facet of your group–including how decisions are made, how funds are spent, and how the organization promotes itself to the public and community partners (NACCHO, 2013).

VALUE :

VALUE BASED
OPERATIONS :

VALUE :

VALUE BASED
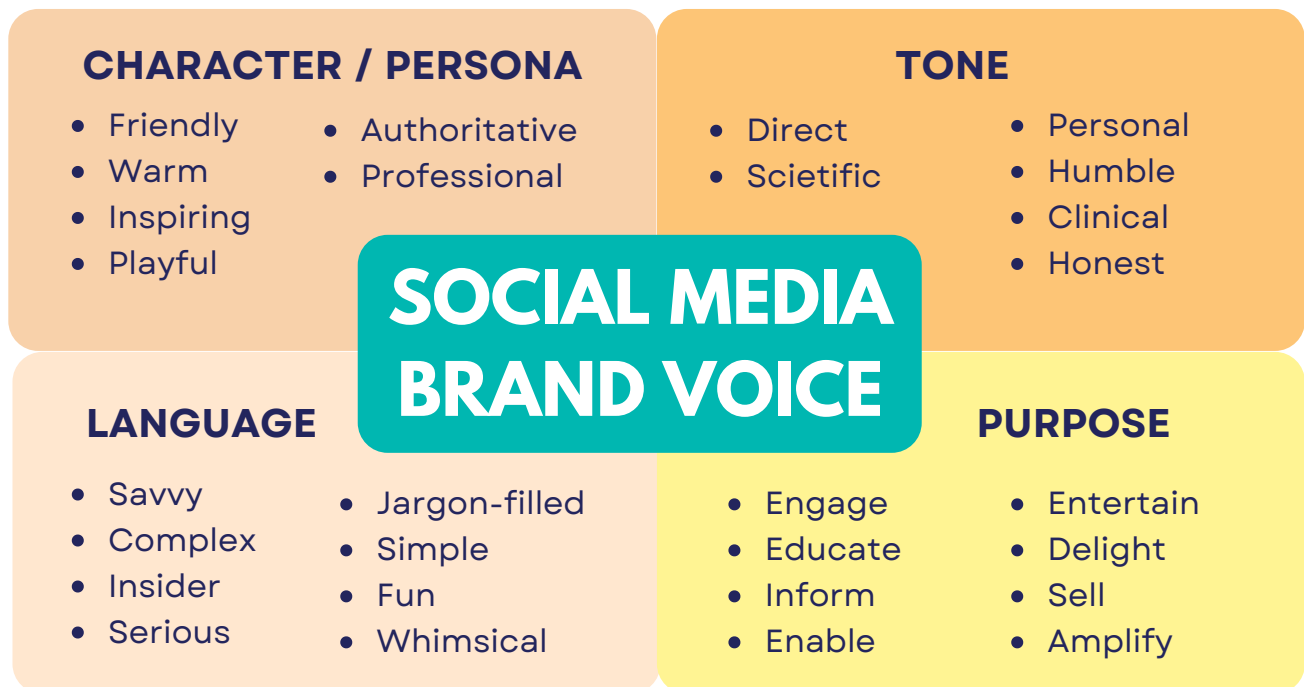OPERATIONS :

VALUE :

VALUE BASED
OPERATIONS :

STEP 4B:
ADHERE TO A DISTINCT, CONSISTENT IDENTITY

A brand is a visual reminder of who the organization is and what it stands for. Graphic elements such as a logo, official font, and color scheme should be defined in all materials and social media platforms. This **ensures a unified and professional look**. Your product or service, plus the demographics of the target audience, will determine the voice and style of a brand on social media.

To do this, you have to develop a **brand standards document** or establish a definition in your organization's communications plan that sets guidelines for logo use, fonts, colors, and design scheme for all communication (NACCHO, 2013).

To guide you on this tricky job, you can read more about developing a brand identity here: **https://www.lean-labs.com/blog/creating-a-brand-identity-20-questions-to-consider**

CHARACTER / PERSONA
- Friendly
- Warm
- Inspiring
- Playful
- Authoritative
- Professional

TONE
- Direct
- Scietific
- Personal
- Humble
- Clinical
- Honest

SOCIAL MEDIA BRAND VOICE

LANGUAGE
- Savvy
- Complex
- Insider
- Serious
- Jargon-filled
- Simple
- Fun
- Whimsical

PURPOSE
- Engage
- Educate
- Inform
- Enable
- Entertain
- Delight
- Sell
- Amplify

PUBLIC HEALTH BRANDING

It **aims to change health behaviors** by influencing how consumers think and feel about a message. This in turn influences the effectiveness of the health communication. Building connections with target audiences enables them to ultimately adopt and maintain healthy behaviors (Vallone et al., 2017).
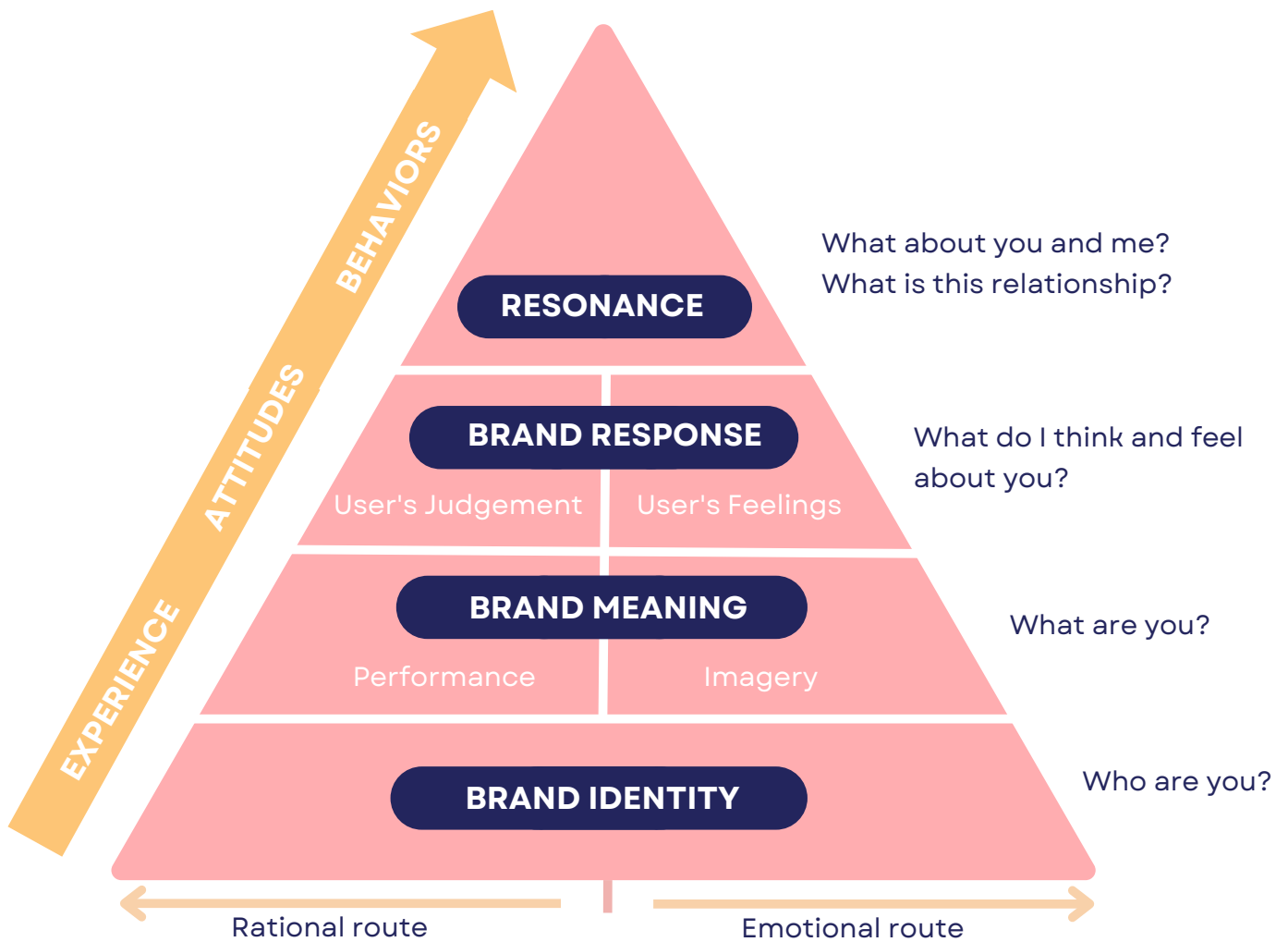
STEP 4C:
BUILD A BRAND EQUITY

Building brand equity not only **improves message recall but also influences behavioral outcomes.** Branded messages are more likely to be effective by countering messages that promote unhealthy behavior (Vallone et al., 2017).

For example, the Truth brand, an anti-tobacco campaign in the USA, competed directly with tobacco industry brands by promising the benefits of a tobacco-free lifestyle to adolescents. The campaign competed for the adolescent's choice between a smoking and nonsmoking lifestyle.

Truth campaign countered existing messages among consumers that encouraged smoking. From this perspective, users are able to see the direct impacts of smoking and thus have a choice to choose a healthier behavior.

Figure 5. Keller's Brand Equity Model (Lane Keller, 2001)

The pyramid diagram contains the following levels from top to bottom:

- **RESONANCE** — What about you and me? What is this relationship?
- **BRAND RESPONSE** (User's Judgement | User's Feelings) — What do I think and feel about you?
- **BRAND MEANING** (Performance | Imagery) — What are you?
- **BRAND IDENTITY** — Who are you?

Left side arrow (bottom to top): EXPERIENCE, ATTITUDES, BEHAVIORS

Bottom: Rational route | Emotional route

BRAND IDENTITY	Build awareness of your brand and ensure that your audiences see the brand the way you intend it to be seen.
BRAND MEANING	Communicate what your brand means ("performance") and what it stands for ("imagery"). Performance is how well your brand meet the needs of the audience while imagery are brand values, design and style.
BRAND RESPONSE	Audience responds to your brand through judgments and feelings. Examples of judgments are quality, credibility, and relevance. Positive feelings include warmth, security, social approval and self-respect.
RESONANCE	Build deeper audience relationships where there is a sense of attachment, loyalty, engagement, and community.

STEP 5

DEVELOP VISUAL DESIGN FEATURES

As the saying goes, "a picture is worth a thousand words." As someone that creates the visual for health information, we must use our visuals to tell a story. In this section, we focus on critical elements to make you better health communicators through impactful design.

STEP 5A:
PRACTICE UNIVERSAL DESIGN

Universal design is the design and composition of an environment so that it can be accessed, understood, and used to the greatest extent possible by all people regardless of their age, size, ability or disability. Know more about it here: **https://universaldesign.ie/what-is-universal-design/the-7-principles/the-7-principles.html**

STEP 5B:
IMAGINE THE CONTENT

The primary purpose of publication materials is for people to engage with the information.

The first step is to interact with your content by visualising the message as a design and identifying images or texts that you associate the content with.

There are several techniques to stimulate your imagination in design planning; two of the most effective are sketching and creating a mood board.

SKETCHING
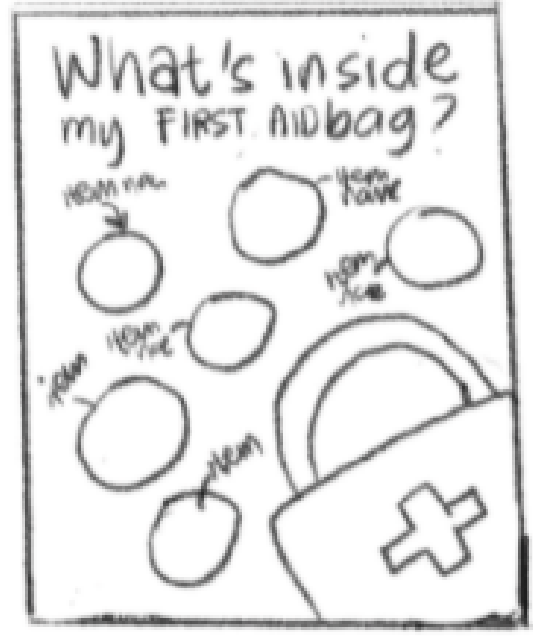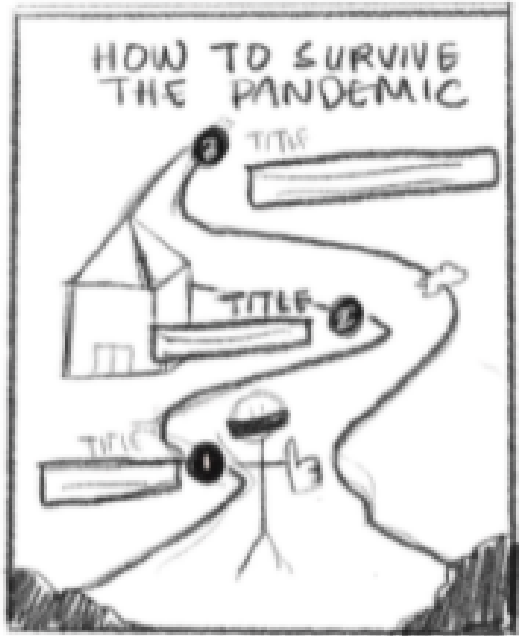
Sketching is an excellent way to quickly explore concepts. It is an effective starting point and a crucial step if you wish to generate a fresh original output.

Now, sketching is not reserved for people who are gifted in drawing. If you are the designer yourself, **as long as you can understand your freehand sketches then that is all that matters**. Your sketches will serve as cues to keep track of all the ideas you have visited so you do not forget them the moment you start translating your sketches into a digital output.

MOOD BOARDING

If you are already satisfied with your sketches, you can go ahead and design on your computer. However, if you are still struggling with the concept planning, mood boarding can help reinforce your vision. Sketching is like visual brainstorming, whereas mood boarding is similar to visual organization.

MOOD BOARDING

This is where you browse different images to set the scene for your design. It helps crystalize the vision, establish a solid design foundation and makes collaboration simple, especially when working with multiple designers/artists.

An effective one usually includes the following:
- Color palette inspiration
- Fonts
- Vibe inspiration
- Distinct elements

Mood boarding can be done digitally by using any photo editing software that has collage features like Moldiv, Canva, or Photoshop. Also try to learn the following:

COLOR THEORY

TYPOGRAPHY

STEP 5C:
KEEP IT TO THREE OR LESS

When you emerge from an avalanche of ideas, you are compelled to test them all out in a single frame. Don't do it. Now that you are done exploring different possibilities of your design, it is time to choose. Ironically, it is more difficult to keep your designs simple than it is to make them complicated.

Simplicity is a philosophy followed by several successful companies like Apple and IKEA.

They all follow the rule of three or less, which basically means choosing a **maximum of three of everything.**

- **Fonts**
- **Elements**
- **Color hue**
- **Message or information**
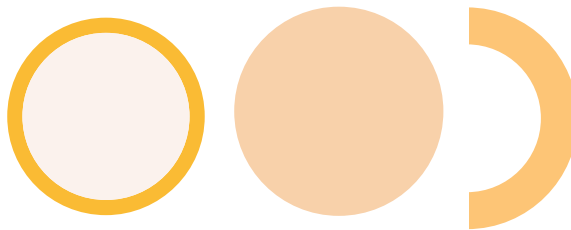
LESS IS MORE

For instance, this rule says that you cannot overwhelm one publication material with more than three charts. In social media, **the average attention span for Facebook videos is about 2 seconds, and on mobile, it is reduced to 1.7 seconds** (Careerarc, 2021).

❌ BAD DESIGN
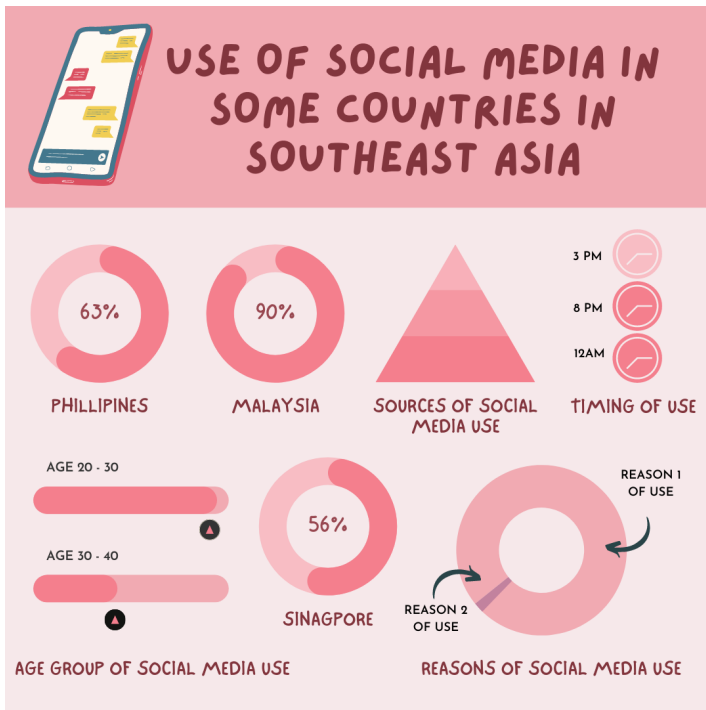
- More than three charts
- Not organized

✅ GOOD DESIGN
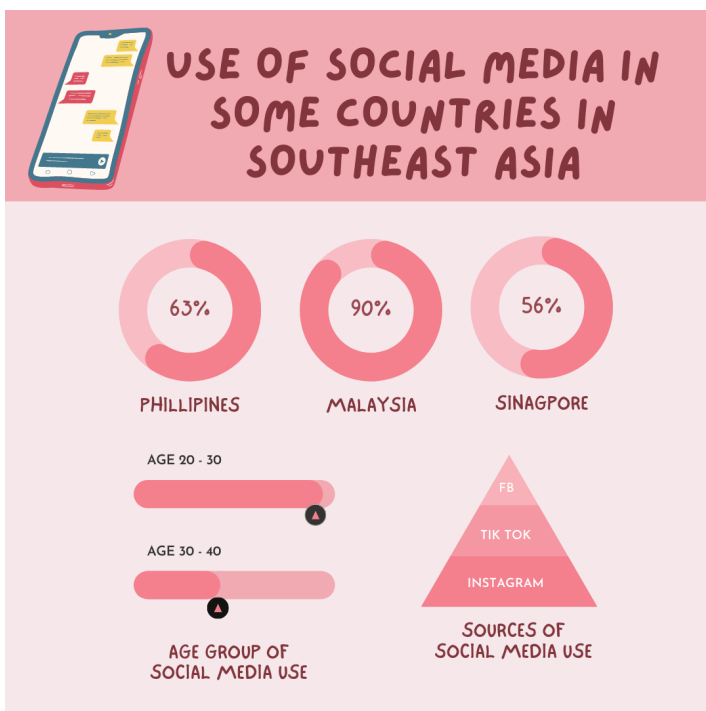
- Three or fewer charts
- Organized based

STEP 5C: GIVE SPACE

Avoid suffocating your design with too much information that no one can read; instead, give it room to breathe. Utilize negative space to draw attention to important information. Negative spaces are the sections of a design that are left blank, including the margins. When done effectively, these spaces reduce the amount of text and elements seen at one time.

❌ BAD DESIGN

- Narrow margin
- Elements are cluttered
- No proximity
- No similarity

✅ GOOD DESIGN

- Simple and organized content, coordinated with the colour
- Simple elements to highlight important

Optimize the arrangement of functional elements inside a single design.

Our minds are wired to derive meaning from the objects we perceive. Being aware of our visual perception's natural behavior ensures that our mind receives information with a proper flow. Thus, the arrangement of functional elements is very important.

Proximity, Continuation, and Figure-ground are all key visual perception concepts in Gestalt psychology that are important in designing.

PROXIMITY

- It refers to how close your elements are to one another.
- Our brains tend to perceive things that are close to each other as one group. This is why we need to give larger space to separate ideas.

SIMILARITY

- It refers to how we automatically perceive objects that share similar characteristics such as color, shape or value as one group.
- This rule is also effective if you want to emphasize a point. That is, keep one element different from the rest to make it stand out.
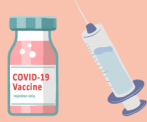
✅ DESIGN WITH PROXIMITY

- The Do's and Don'ts are placed farther apart so that they are perceived as two different instructons.
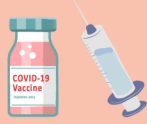

✅ DESIGN WITH SIMILARITY

- The Do's share similar characteristics such as the pink color block and square shape.
- The Dont's share similar characteristics such as the white color block and square element.
- You are able to tell they are each one group.

STEP 5D:
MAKE ONE BIG POINT

Choose a single focal point that you want your audience to first notice. It can be a large text or an image. The attention-grabber is larger or bolder than everything else in your design.

Choosing a focal point is vital for information retention. It will be the main information that your viewers will recall readily and will prompt them to remember the complete piece of the content. This is effectively done through understanding the principles of continuation and figure-ground.
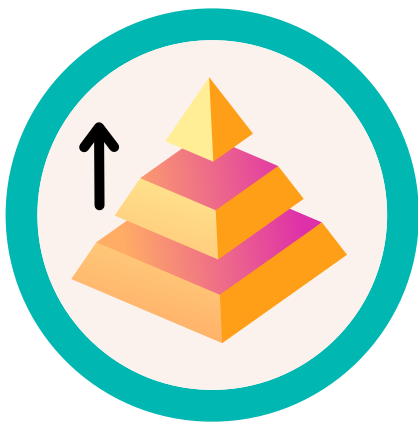
CONTINUATION

- It refers to how we perceive a design in a certain direction. Our mind follows established lines and arrows in a design.
- An effective infographic has cues that a viewer can follow. We also detect the hierarchy of information.
- It is at the focal point where your viewers begin their journey in your design.

FIGURE-GROUND

- It refers to how our eyes automatically separate an object from their background.
- This principle takes advantage of negative spaces and color contrasting.
- When done correctly, the figure/ground principle can be very handy when designers want to highlight a focal point.
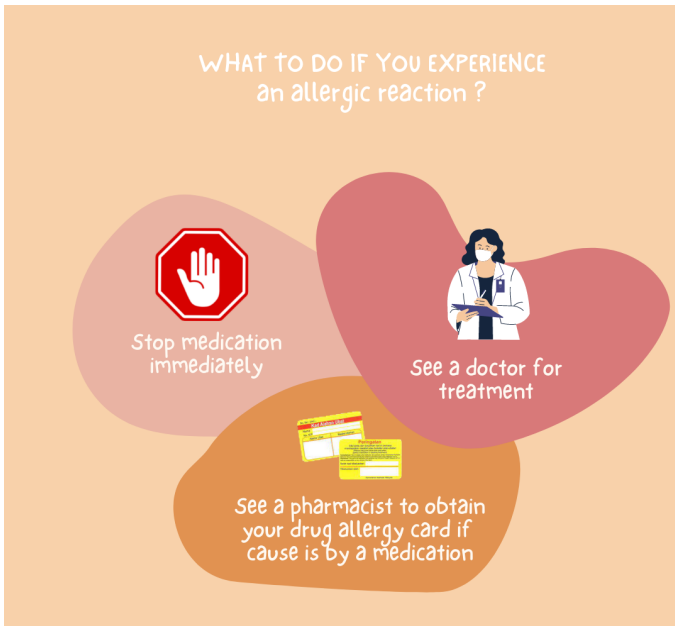
BAD DESIGN

- The title is similar font size to the content. There is no focal point.
- Information is not organized according to the order of the steps or flow .

GOOD DESIGN

- The title is the focal point.
- There are numbers labelled for Steps 1 to 3 which eases the readers to understand the flow of the content.
- The color of the title is also contrasted well against the background to differentiate the focal point.

For more examples, check out this link: **https://tinyurl.com/elyte-design**

STEP 5E:
TEST YOUR DESIGN

ASK A HUMAN

- Consult with another individual who shares the same qualities with your target audience.
- You need another set of eyes to examine.
- If using pictures of communities in the design, do note to seek for permissions first before posting your work

ASK ARTIFICIAL INTELLIGENCE

- First impression is critical for attracting your audience's attention and generating designs that have an impact.
- The **Virtual Attention Software** is a web-based application that examines your design using an artificial eye-tracker map and generates a heat map or attention score for your design.
- It was developed to quickly and accurately simulate how people will see your visuals in the first 3-5 seconds.
- The greater the score or saturation level of the heat map, the more likely it will be viewed by your users.
- Additionally, it displays a gaze sequence, which indicates the order in which your design will be seen. According to reports, this program has a 92% accuracy rate.

Virtual Attention Software:
https://www.3m.com/3M/en_US/visual-attention-software-us/

STEP 6

MANAGE YOUR SOCIAL MEDIA ACCOUNT

Knowing design is one thing, being proficient with the platform is another. In so doing, you will be able to harness your social media presence to boost your campaign's reach. After all, a well-designed, responsive, and organized social media platform increases the trust and confidence of your users.

In this section, we want to highlight best practices from CDC and HubSpot in using Facebook and Instagram as social media platforms because of their popular use among organizations for their campaigns.

STEP 6A:
REVISIT YOUR FACEBOOK PHOTOS

PROFILE PHOTO

- Think of it as your first impression, and be sure to choose something immediately recognizable
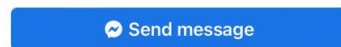- Size specifications: 180 x 180 pixels

COVER PHOTO

- Should express your page's identity and can be updated often based on special offerings, campaigns, or seasons
- Size specifications: 820 x 312 pixels

Project e-Lyte
@projectelyte · Medical & health

Send message

Hi! Please let us know how we can help.

REVISIT YOUR INSTAGRAM PROFILE

PROFILE

- Ensure your profile is public
- Have a easily searchable username
- Size specifications of profile photo: 110 x 110 pixels
- Consider the seasonal trends where you may change your profile photo to honor a specific event such as Pride Month

BIO INFO

- You can write a max of 150 characters
- Include who you are, what you do
- Due to limited characters, you may add a Linktree as your website
- Linktree is a tool that allows you to share multiple links on social media

wedocere

pocketofcare

muphas_phc2022

STEP 6B:
KEEP YOUR CONTENT SHORT, SWEET, AND SIMPLE

Visuals

Captions

A social media post has two elements: an appealing visual and a caption that tells a story

- The length of posts should be 250 characters or less to allow the post to be viewed in its entirety in the news feed. Content quality is more important than content quantity.
- Include a compelling meta description with each post you write. Refer to Step 3: Develop the Key Message Content, page 28.

STEP 6C:
REGULARLY POST AN IMAGE OR VIDEO

Facebook posts with images see 2.3 times more engagement than those without visuals and account for 87% of total interactions.

- Remember the specification of your images for Facebook : **1200 x 630**
- The ratio is more important than the size. Keep a **1.9:1 ratio.**
- For Instagram a 1080px by 1080px at a 1:1 aspect ratio. For landscape posts, use an image that is **1080px by 566px**, with an aspect ratio of **1.91:1.**
- Make use of Facebook's or Instagram's **photo layout option** when posting multiple images. This can make your visual elements more enticing.
- Try to keep a consistent style among all the images you post.
  Refer to Step 4. Develop a Project Identity, p46 and Step 5. Develop Visual Design Features, p52

If you are looking to tell a story, video is likely your best option. The Facebook algorithm now prioritizes both live video and longer videos with high completion rates in users' news feeds (Megan Conley, Hubspot).

STEP 6D:
DETERMINE SCHEDULE AND FREQUENCY OF POSTS

It is important to set a posting schedule that defines a regular frequency for posts per week. Setting a regular schedule helps to ensure that the account is active and encourages more engaged users.

CDC recommends posting daily at a minimum. But, according to writer David Hartshorne, there is no magic formula for deciding how often to post on social media. Reviewing posts and what day and time have the most interaction for your page will help in optimizing your reach.

Find the out about the best times to post:
https://www.perzonalization.com/blog/best-time-to-post-on-social-media-in-2022/

POSTING CONSISTENCY IS MORE IMPORTANT THAN POSTING FREQUENCY
(Hartshorne, 2022)
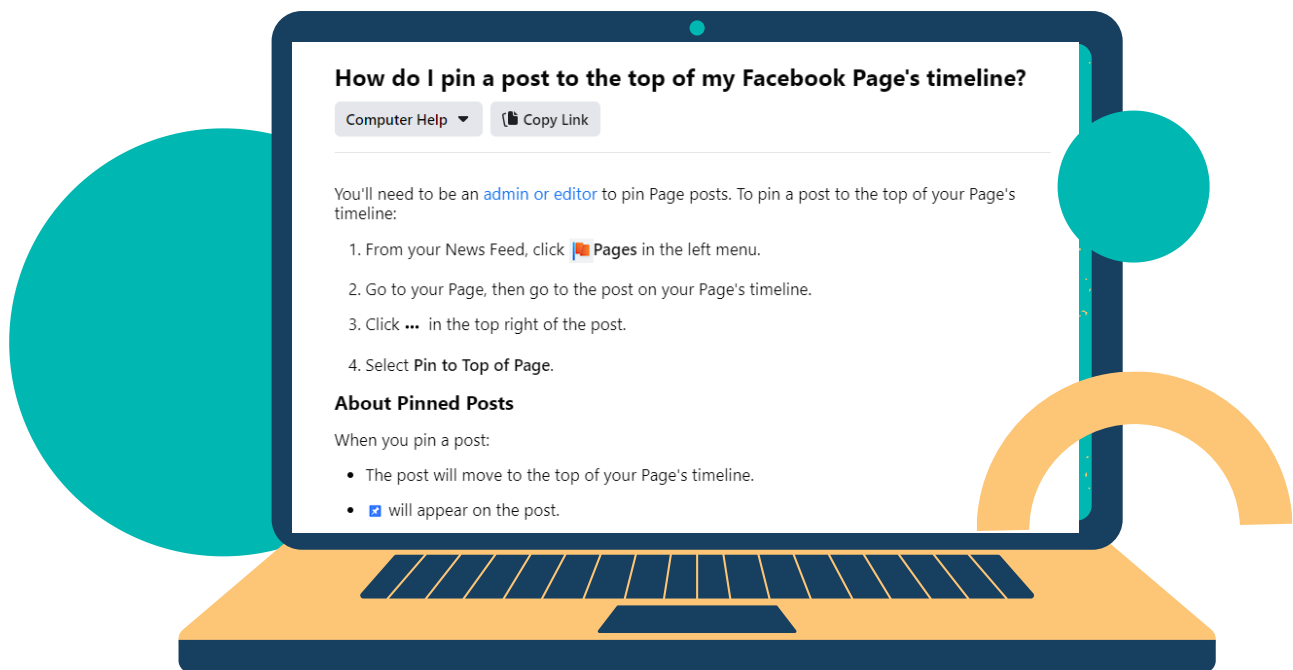
STEP 6E:
IDENTIFY THE BEST WEB LINK

All posts should include a single URL to direct the user for more information.

STEP 6F:
CONDUCT PROMOTION ACTIVITIES

Ongoing promotion of your Facebook page or Instagram is strongly recommended. Pin content on Facebook to highlight important posts and links to increase engagement with your users. This post will remain pinned until you choose to pin another post and replace it. For Instagram, use the highlight function.

How do I pin a post to the top of my Facebook Page's timeline?

Computer Help ▼ | 🗐 Copy Link

You'll need to be an admin or editor to pin Page posts. To pin a post to the top of your Page's timeline:

1. From your News Feed, click 🚩 **Pages** in the left menu.

2. Go to your Page, then go to the post on your Page's timeline.

3. Click **...** in the top right of the post.

4. Select **Pin to Top of Page**.

About Pinned Posts

When you pin a post:

- The post will move to the top of your Page's timeline.

- ☑ will appear on the post.

STEP 6G:
REGULARLY REVIEW SOCIAL MEDIA INSIGHTS FOR SPECIFIC METRICS

You may also consider monitoring the increases in traffic to your website, as well as the mentions outside of social media on blogs, websites or articles.
This is so that you are able to know if you're engagement insights are contributed by any specific social media posts. Refer to Step 10: Evaluate Your Campaign.

STEP 7

ENGAGE YOUR USERS

Engaging your users means presenting content in a way that motivates them to take action. In the context of digital health interventions, engagement is described as the extent of usage and a subjective experience characterized by attention, interest and effect. It is what translates into a change in behavioral outcomes.

In this manual, **engagement** with health technologies is examined at two levels:
- Engagement with the technology itself
- Engagement with the health behaviour the technology aims to improve (Kelders et al., 2019)

POSTING CONTENT IS ONE HALF OF A CONVERSATION.

You have to be available to join in the discussion when people respond to your posts. Social media engagement with users takes many forms such that it can be referred to as multi-way interaction between and among an organization and the so-called digital communities. To fully engage your users in your social media campaign strategy, the following building blocks that shape individual engagement should be addressed.
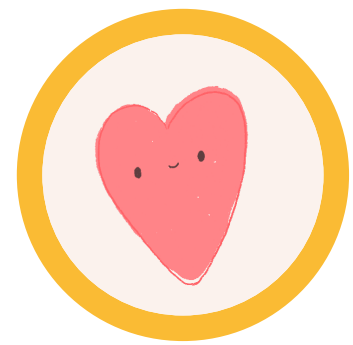
BEHAVIOR

- Does your technology (e.g., social media campaign) allow for routine use and easy navigation?

COGNITION

- Does your technology motivate the users to achieve their goals and does it increase their ability to do that?

AFFECT

- Does your technology allow the users to experience positive emotions in working with the technology itself?

Many online content creators are "pushing" information rather than encouraging participation and engagement.

This leads to an essential missed opportunity as user engagement can provide opportunities to develop and strengthen relationships, develop group identity, harness community intelligence, and motivate action (Ramanadhan, 2013).
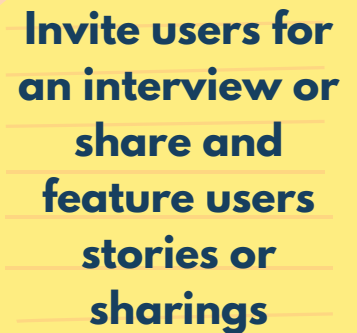
Here are some pointers to drive reactions from your users with the content that you post:

Provide more than expert information

Asks users to Share, Like, or Comment within the post or content

Invite users for an interview or share and feature users stories or sharings

Post content that is actionable, such as events, quizzes, polls, challenges, videos, infographics, interactive posts on trending health topics (CDC)
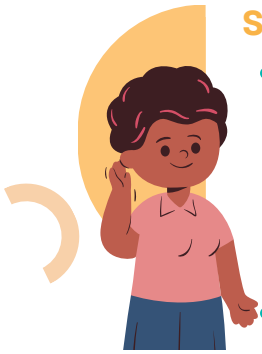
Post more "human interest" pieces – those that elicit emotions

STEP 7A:
KNOW KEY PRINCIPLES OF SOCIAL MEDIA ENGAGEMENT FOR PUBLIC HEALTH (Heldman et al, 2013)

Step 7A.1. Invest in Social Media Listening

- **Social media listening** identifies what your users are particularly concerned about in social media and how their priorities shape their perspectives on health. The ability to listen and respond with relevant messaging will determine the effectiveness of your campaign strategy.
- How to do social media listening:
  https://blog.hootsuite.com/social-listening-business/

Step 7A.2. Engage with Influencers

- **Determining key partners and public health influencers** helps drive online conversations on topics of interest concerning health. Using their credibility and persistence in health promotion will establish rapport while effectively delivering the message to the target population.

Step 7A.3. Be Responsive to Questions and Opportunities for Collaboration

- **Establishing a responsive system in providing feedback to your users' comments** will help encourage engagement with your organization. Responding to health-related questions and comments, both negative and positive, is the main driver in ensuring the integrity of the data being presented.
- Aside from direct feedback, maximize the experience by **allowing people to collaborate with your organization.**

STEP 8

PERFORM INTERNAL QUALITY CONTROL

We need to ensure that the content and materials produced have been vetted to the utmost highest possible quality.

STEP 8A:
REVIEW THE MATERIALS YOU PRODUCE

To check the quality of your work based on the basic principles of effective health communication, use the **CDC Clear Communication Index**. It is a free-to-use, research-based tool to help you develop and assess public communication materials.
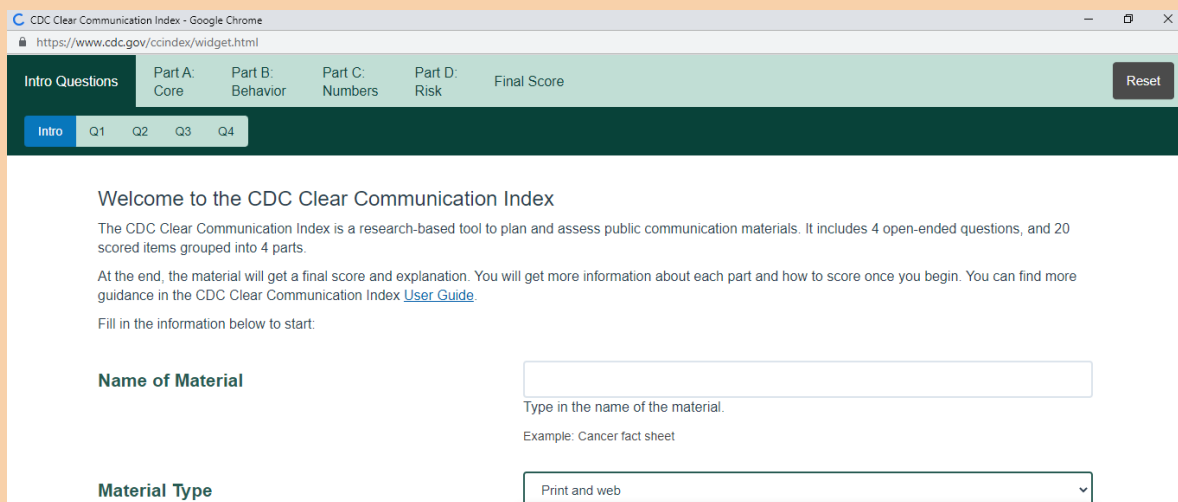
CDC CLEAR COMMUNICATION INDEX

Q 4 The Index has four introductory questions

20 ITEMS 20 scored items drawn from scientific literature represent the most important characteristics that aid people's understanding of information

You may access the index here: **https://www.cdc.gov/ccindex/index.html#**

Figure 3. Screenshot of the interface of the CDC Clear Communication Index

Other assessment tools can be found here:
https://www.hsph.harvard.edu/healthliteracy/assessing-and-developing-materials/

STEP 9

COLLECT FEEDBACK FROM USERS AND REVISE MATERIAL

Just because a material is widely used does not imply that it is working well for the people who use it. Feedback from readers is a powerful tool for ensuring that your online health materials are clear and effective. Here are the steps you can take to collect feedback.

STEP 9A:
CHOOSE WAYS TO GET FEEDBACK

Individual interviews and focus groups with your target audience are two approaches to elicit their responses to written materials. Each way has its own pros and cons **(https://tinyurl.com/interviewdifference).** Either way, you can ask about the following, and a lot more:

WHAT ABOUT THE IMAGE ON THE MATERIALS—ARE THEY APPEALING?

· · · ·

IS THE CONTENT CULTURALLY APPROPRIATE?

· · · ·

DO YOU LIKE THE LAYOUT?

· · · ·

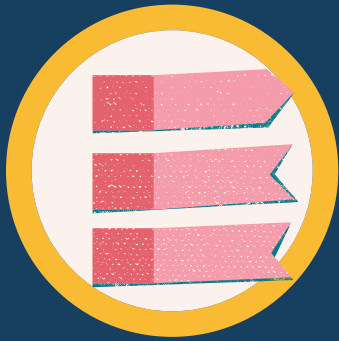HOW MIGHT YOU PUT THE MATERIALS TO USE ?

· · · ·

You may use the **Delphi Technique** for target audiences who might not have the courage to express their feedback through interviews or focus groups because they want to be anonymous - **https://www.marketing91.com/delphi-method/**

STEP 9B:
CHOOSE THE METHOD

There are four effective methods for gathering feedback (CMS, 2010):

ASK QUESTIONS

- Direct questioning is a flexible, powerful, and essential tool for getting readers' reactions to written materials.

ASK THE READER TO " THINK ALOUD "

- To gather the most useful feedback, you want readers to feel comfortable about talking freely and openly about their reactions to the written material.

GIVE READERS A TASK

- This is a type of "usability testing." The "task" is something specific that you ask a reader to do that involves using the material like enumerating the steps to avail a specific medical service.

OBSERVE READERS' BEHAVIOR

- It shows you how much readers differ in their insights and approaches to written material.

STEP 9C:
PREPARE YOUR QUESTIONS

After you decide your way and method for getting the feedback, the questions that you will use are also an important part. Here are some bits of advice on preparing your questions.

- Make your question sound like natural speech
- Phrase your question into the neutral way
- Keep the question friendly and non-intimidating
- Be sure what you are asking is clear
- Ask questions that are opened-ended

STEP 9D:
ANALYZE FEEDBACK AND REVISE THE MATERIAL AS NECESSARY

Using feedback from readers to improve your written material will make it more effective for the intended readers. Besides making this positive contribution to improving health literacy, working with readers to collect and use their feedback will help you become more skilled at producing written material that is easier for people to understand and use.

You have to interpret the meaning behind the feedback and judge what is most important. You have collected clues which require interpretation, and you cannot necessarily treat them at face value. You will need to weigh all of the evidence in order to reach a conclusion about how to use it.

EVIDENCES OF ISSUES

FEEDBACK TO IMPROVE

STEP 10

EVALUATE YOUR CAMPAIGN

The final step involved in any health communication campaign is evaluation. While this toolkit offers practical suggestions, it does not replace the need to get feedback directly from your intended audience. The guidelines herein will give you a big head start in producing effective materials, but impact on the behavior of your target populations is the ultimate test (CMS, 2010).

STEP 10A:
APPLY DIFFERENT EVALUATION FORMS

TYPES OF EVALUATION

How do you know if your online campaign is making a difference?

To know whether your intended users are noticing, understanding, and using the materials, you need to do testing and evaluation that include getting feedback directly from them. There are three types of evaluation according to the Health Communication Unit of the University of Toronto. You can use any or all of these as you evaluate your own e-health promotion campaigns.

FORMATIVE EVALUATION
includes audience analysis and pretesting

PROCESS EVALUATION
examines the procedures and tasks involved in implementing a program

SUMMATIVE EVALUATION
consists of a comparison between the audience's awareness, attitudes and/or behavior before and after the program

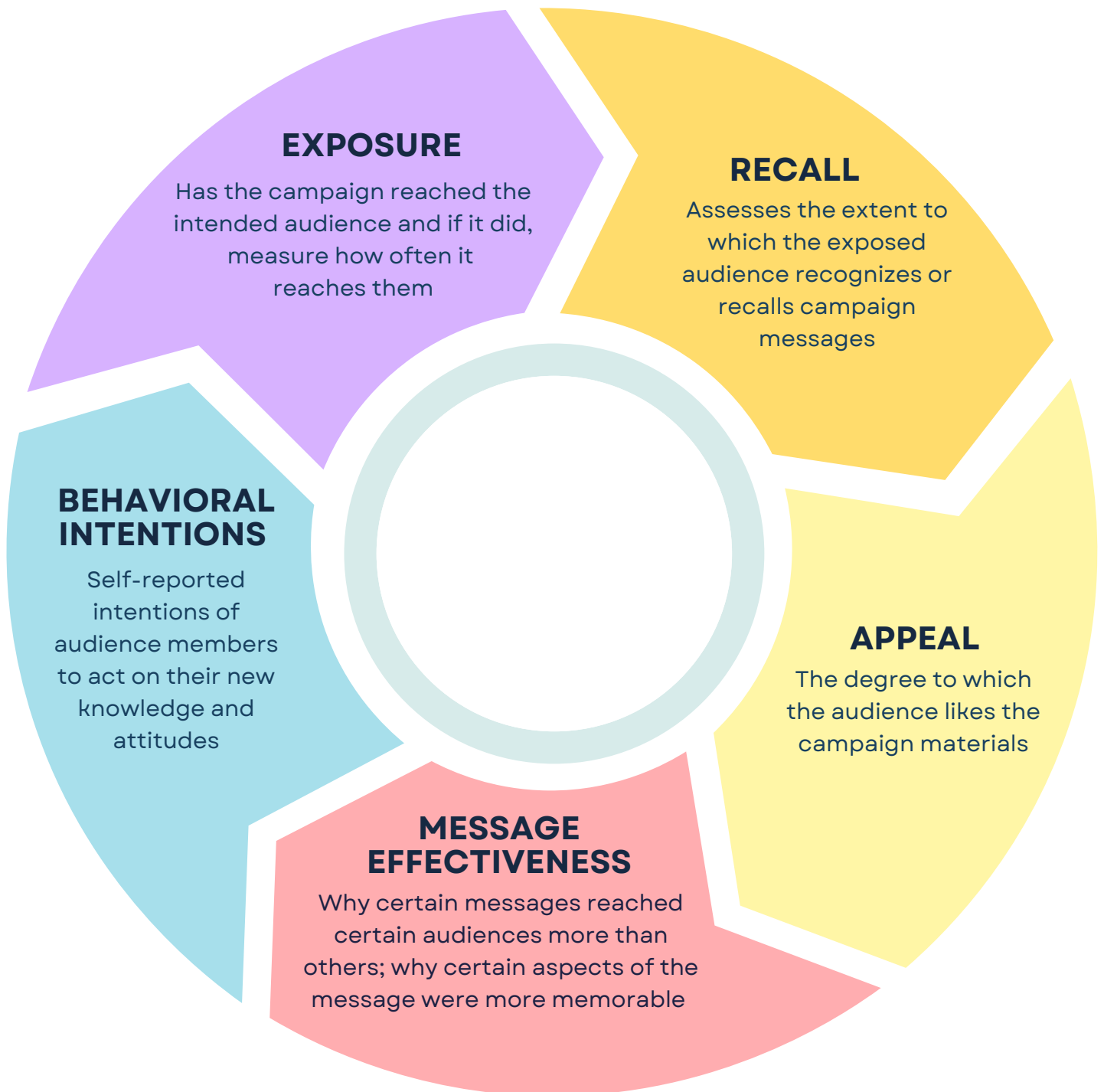| Before Implementation (Formative Evaluation)	During Implementation (Process Evaluation)	After Implementation (Summative Evaluation)
Describe the audience • Demographics • Behaviors • Psychographics	**Describe the following metrics** • Times a post or profile has been seen • Number of followers • Audience growth rate • **Post reach percentage** (post views/total followers) • **Average engagement rate** ([likes + comments + shares] / followers) • **Amplification rate percentage** (total post shares/total followers) • Web traffic	**Determine who responded?** • Demographics • Geographic residence
Determine whether the materials are • Understandable • Relevant • Attention-grabbing • Attractive • Credible • Acceptable • Effective		**Evaluate if there was a change?** • Changes in knowledge and/or attitude • Changes in intentions • Actions taken • Policies initiated

ADVERTISING MODEL OF EVALUATION

It is a type of summative evaluation model ideal in guiding you to assess the status of your social media campaign. It relies on audience surveys that look at the following parameters (Flay & Cook, 1991):

EXPOSURE
Has the campaign reached the intended audience and if it did, measure how often it reaches them

RECALL
Assesses the extent to which the exposed audience recognizes or recalls campaign messages

APPEAL
The degree to which the audience likes the campaign materials

MESSAGE EFFECTIVENESS
Why certain messages reached certain audiences more than others; why certain aspects of the message were more memorable

BEHAVIORAL INTENTIONS
Self-reported intentions of audience members to act on their new knowledge and attitudes

STEP 10B:
ASSESS YOUR USER'S E-HEALTH LITERACY

How do you determine whether individuals have the capacity to engage with e-Health programs and interventions?

You need to know if electronic health tools are suitable methods for effectively promoting population health and aiding health care.

E-HEALS

The e-HEALS is an 8-item measure of e-health literacy developed to measure consumers' combined knowledge, comfort, and perceived skills at finding, evaluating, and applying electronic health information to health problems.

It is designed to provide a general estimate of consumer eHealth-related skills that can be used to inform clinical decision making and health promotion planning with individuals or specific populations (Norman et al., 2006).

		Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
A	How useful do you feel the Internet is in helping you in making decisions about your health?	1 Not useful at all	2 Not useful	3 Unsure	4 Useful	5 Very Useful
B	How important is it for you to be able to access health resources on the Internet?	1 Not important at all	2 Not important	3 Unsure	4 Important	5 Very important
		Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
1	I know how to find helpful health resources on the internet.	1	2	3	4	5
2	I know how to use the internet to answer my health questions.	1	2	3	4	5
3	I know what health resources are available on the Internet.	1	2	3	4	5
4	I know where to find helpful health resources on the Internet.	1	2	3	4	5
5	I know how to use the health information I find on the internet to help me.	1	2	3	4	5
6	I have the skills I need to evaluate the health resources I find on the Internet.	1	2	3	4	5
7	I can tell high quality from low quality health resources on the Internet.	1	2	3	4	5
8	I feel confident in using information from the Internet to make health decisions.	1	2	3	4	5

We hope you actively join us in our mission to improve the state of e-health literacy in the region!
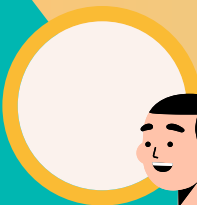
Use the e-Lyte toolkit when you intend to create online health materials.

Spread the word about this to your friends. You can tell them to reach out to us for a copy of the manual.

Live by the communication principles of this manual in your daily interactions with people.

If you represent an organization, hand this manual over to succeeding batches.

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RESOURCES FOR SPECIFIC POPULATIONS

This list of online resources will help you understand more the specific communication needs of the following audiences for a more tailored approach.

DEAF COMMUNITY

https://projeksihat.com/deaf-community/
By Galen Centre for Health & Social Policy

ELDERLY COMMUNITY

https://projeksihat.com/elderly-community/
By Galen Centre for Health & Social Policy

ROHINGYA COMMUNITY

https://projeksihat.com/rohingya-community/
By Galen Centre for Health & Social Policy

BURMESE COMMUNITY

https://projeksihat.com/burmese-community/
By Galen Centre for Health & Social Policy

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Health
Literacy
Simplified.

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