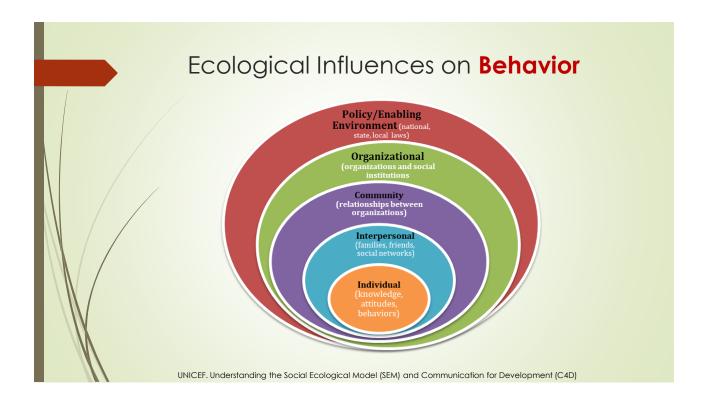


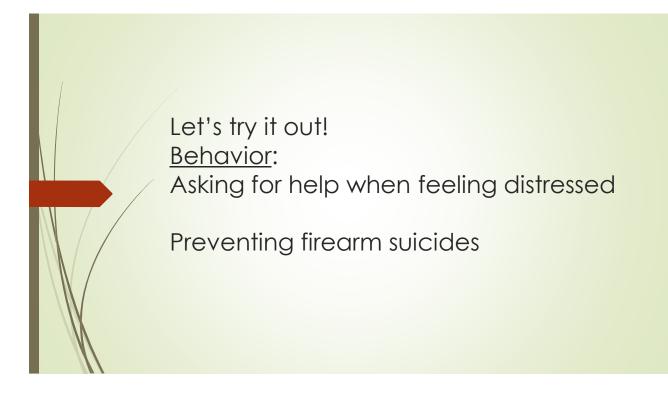
The Science of Communicating Effectively for Behavior Change

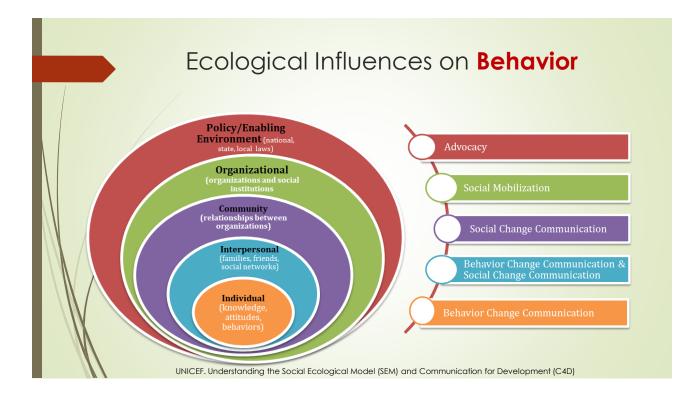
Rima Afifi, PhD Professor Community and Behavioral Health Dept. College of Public Health University of Iowa

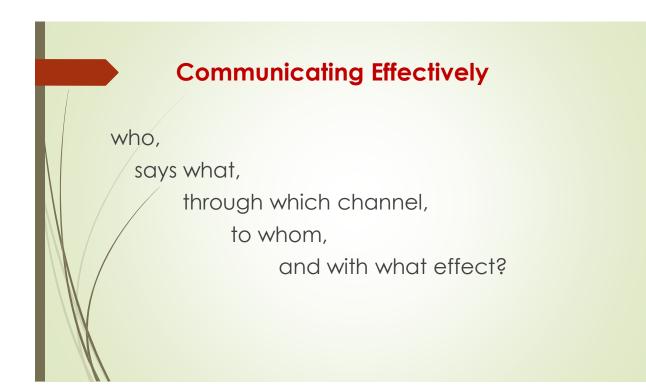
Objectives

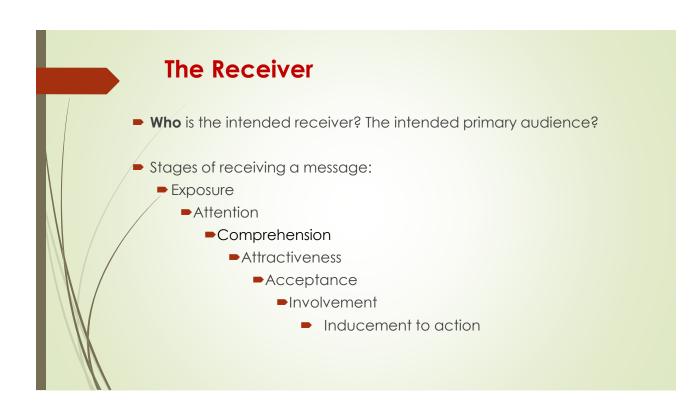
- Describe influences on behavior
- Identify aspects of effective communication for behavior change
 - Receiver
 - Messenger/Sender
 - Message
 - Channel
 - Community engagement
 - Scientific accuracy

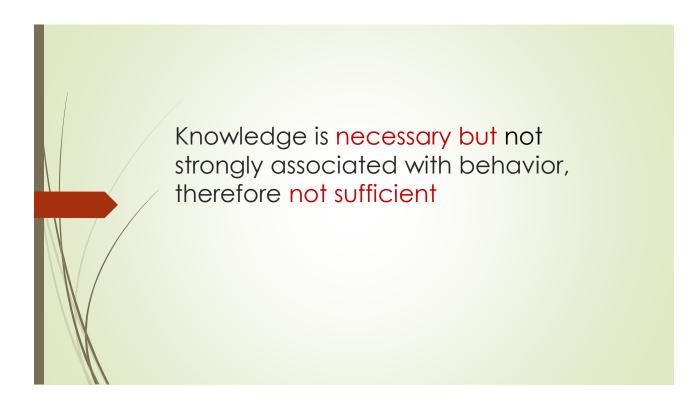






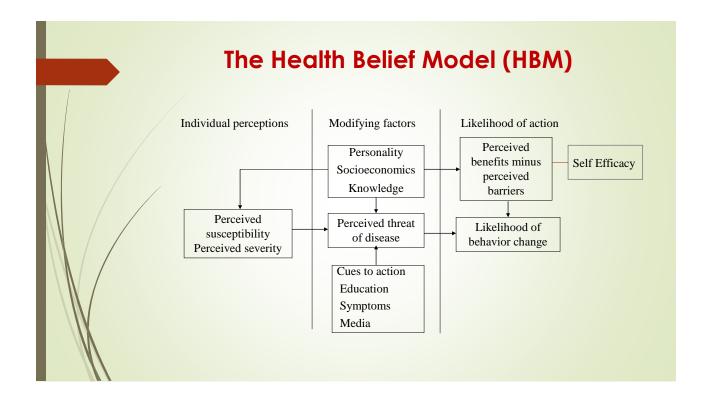


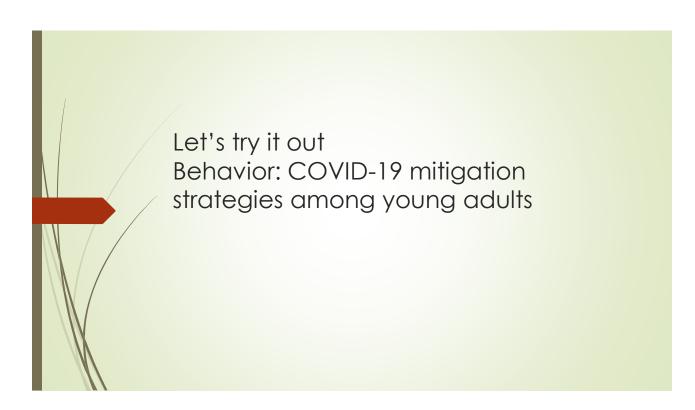




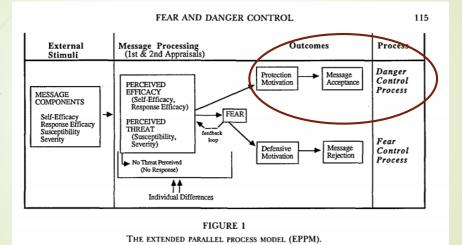








The Extended Parallel Process Model



Kim Witte (1994) Fear control and danger control: A test of the extended parallel process model (EPPM), Communications Monographs, 61:2, 113-134, DOI: 10.1080/03637759409376328

EPPM AUDIENCE SEGMENTS AND STRATEGIES High Efficacy Low Efficacy Belief in effectiveness of solutions and Doubts about effectiveness of solutions and about confidence to practice them one's ability to practice them **High Threat** Danger Control Fear Control Belief that the threat is People take protective action to avoid or People are too afraid to act, just try to reduce harmful and that one is reduce the threat. their fear and feel better. at-risk Strategy: Provide calls to action Strategy: Educate about solutions Low Threat Lesser Amount of Danger Control No Response Belief that the threat is People know what to do but are not really People don't feel at risk and don't know what to trivial and that one is not motivated to do much. do about it anyway. Strategy: Educate about risk and about solutions Strategy: Educate about risk at-risk

http://www.healthcommcapacity.org/wp-content/uploads/2014/09/Extended-Parallel-Processing-Model.pdf





The Message

- Tailored to the audience (no such thing as one message that reaches everyone) – tone, language, messenger
 - Requires an understanding of the intended audience (might need some formative work)
- Scientifically accurate the challenge of no absolutes in public health!
- Balanced: presents benefits and risks
- Simplify the message complex messages shut down the process
- Content Already many ideas from discussion of attitudes
- Perceived invulnerability / unrealistic optimism(focus on risk behaviors rather than risk groups) – personalize the risk
- Relevant to intended audience and their motivations
- Novel information / information presented in a novel way
- Requests to attend: "now hear this."
- Denotative specificity (you); spatial / temporal immediacy (present tense); qualifiers (may, might)
- Consistent and Repeated

The message TARES Test

- •Truthfulness,
- •Authenticity
 - •Respect,
- •Equity, and
- Social responsibility

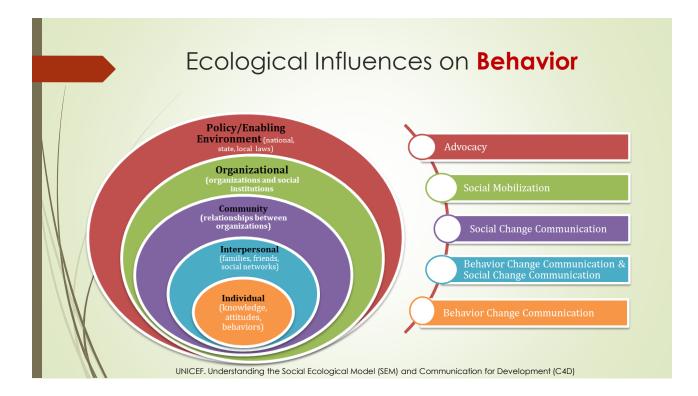
Truthfulness (of the message), Authenticity (of the persuader), Respect (for the persuadee), Equity (of the persuasive appeal) and Social Responsibility (for the common good).

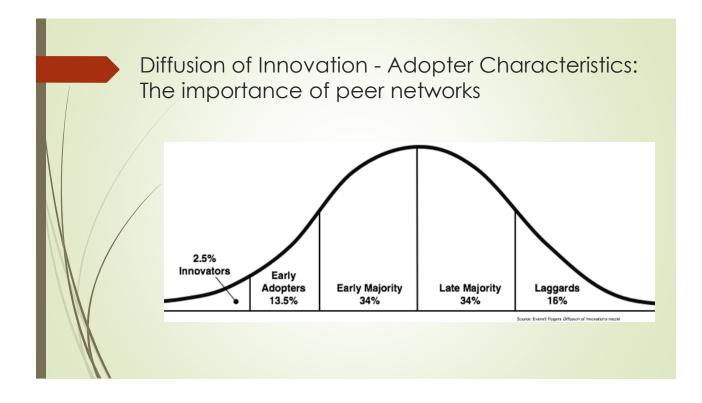
The Channel

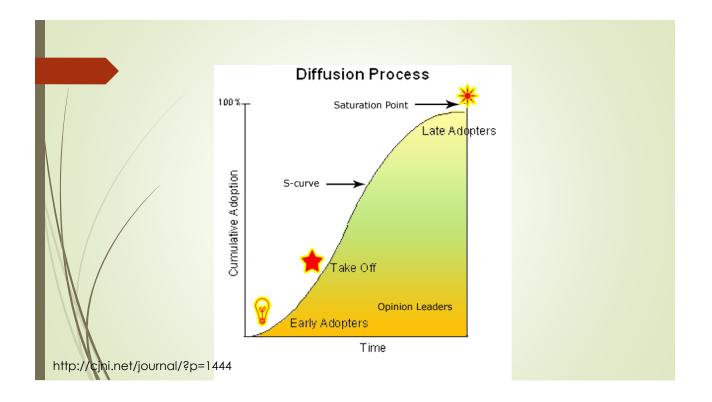
- Understanding touchpoints in the day/week/month life of the intended audience – all those become potential channels
- Use more than one channel
- In choosing channels, consider:
 - Reach
 - Frequency
 - Impact
 - Credibility
 - Cost effectiveness

Community engagement

An overlooked imperative in effective communication for behavior change!







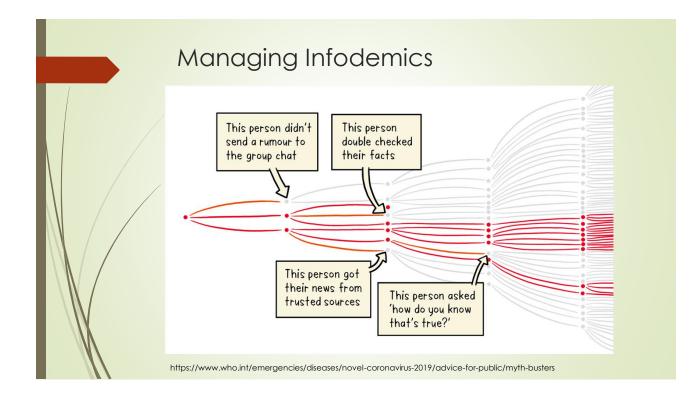


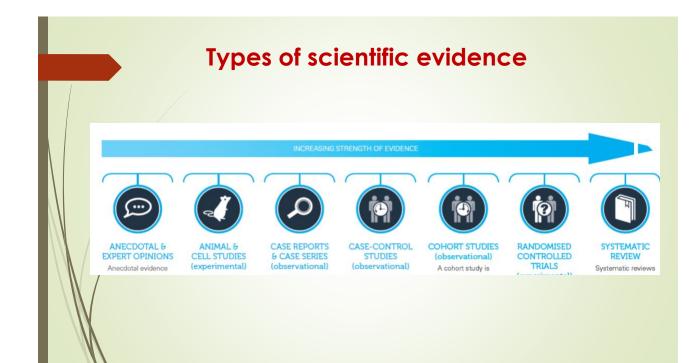
One FINAL CRITICAL message-related factor of effective communication for behavior change

We are in the midst of an infodemic?

- "overabundance of information some accurate and some not – that occurs during an epidemic"
- Effective communication is premised on promoting accurate messages – managing infodemics

https://www.who.int/teams/risk-communication/infodemic-management





How to identify accurate science

- What is the evidence?
- Who says this is the evidence?
- How was the evidence found? (methods, sample size, acknowledgement of limitations of the study, ...)
- Is there a claim of exclusivity?
- Others?

Questions?

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