Chapter 2
Strategic Communication Campaigns

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Introduction

One of the best ways to promote good health in society is through the use of communication campaigns to inform and educate the public about healthy habits and good health care. Although the importance of mass communication in promoting health is widely acknowledged, creating effective communication campaigns can be a complex process. Health messages have a variety of characteristics that differentiate them from other types of mediated messages. Among these are the sensitivity of health issues, the fear that some health messages evoke, the attendant feelings of resistance to some health messages, and the complex nature of many health problems. Many health messages focus on sensitive and personal issues such as sexually transmitted diseases, substance abuse and addiction, abortion, and mental illness. Because these subjects are difficult and emotional for many audience members, they can be especially challenging to develop effective communication campaigns to check.

Many communication campaigns fail on account of audience members resisting the messages because they contradict adopted habits and ingrained behaviors. Successful health campaigns have to address these behaviors directly or indirectly in an accepting or nonthreatening manner, using appropriate emotional and/or logical persuasive appeals, designed to elicit desirable attitudes and behaviors. Some health campaigns that evoke fear may seem to work but only for a limited time only because audience members eventually overcome such fears or learn to avoid the messages that evoke fear. This was the case with some of the early HIV/AIDS campaigns, which became less impactful with time. Many people go back to their old habits after the campaigns conclude. Old habits die hard, even when we know they are unhealthy and need to change. Attitude and behavior change as a result of health communication is a complex process. We cannot expect desired outcomes to be realized all the time from programmed interventions.
Health communication campaigns are a subset of general communication campaigns. Interventions to change health-related practices take a variety of forms involving both interpersonal communication and the mass media. Therefore, creating effective health communication campaigns requires a thorough understanding of the various media channels available, as well as the issues and appropriate strategies for delivering the messages to achieve the best results possible.

Communication Campaigns

Communication campaigns are all around us and it is impossible to avoid them in our contemporary environment of traditional communication and the new social media. A communication campaign is a series of coordinated messages or other promotional efforts that are purposively designed to achieve predetermined goals or objectives. According to Paisley (1989, p. 16), communication campaigns are defined with reference to their objectives and methods, with the former focusing on “one group’s intention to influence other groups’ beliefs or behavior, using communicated appeals.” Atkin’s (1981, p. 265) definition of communication campaigns as “promotional messages in the public interest disseminated through mass media channels to target audiences” illustrates a methods approach. The methods for communication campaigns today encompass more than the mass media to include special events, interpersonal communication, and personal influence.

Communication campaigns are presented in different forms and they serve different purposes, with the most popular ones being for promoting political causes and candidates. Others are for public health and wellness, public welfare and safety, and promoting charitable causes. Most communication campaigns are sponsored by entities such as governments, private companies, nonprofit organizations, communities, and social change advocates. Successful public communication programs today require mass communication campaign strategies, as evident in the investments of time, money, and other resources in many of today’s political campaigns. Success or failure in elections is largely determined by campaign managers’ skills in staging effective communication (including new social media) campaigns. The strategies may include opposition research, specific audience targeting, constant adjustment of the messages, and minute-by-minute tracking of issues. In the age of digital communication and 24/7 news cycles, constant attention must be paid to message delivery, audience reaction, and unintended results. In recent years, the US presidential campaign has provided the arena for testing the most competitive communication campaign strategies that underline the supreme importance of timing, packaging, monitoring, and image management. One single incident, no matter how seemingly innocuous, can spell doom if allowed to snowball into a crisis.

Next to political campaign managers, the other proficient users of communication campaigns are product and brand marketers who are willing to pay any price to deliver their messages to the right audience through the right channels at the right time. Some communication campaigns are more effective than others. In 1984,
Apple aired only one short commercial during the Super Bowl telecast and created a buzz that is still talked about today because of its uniqueness and fascinating creativity. And, the US Advertising Council has affected generations of Americans with the indelible messages of such public service announcements as the historic American Red Cross campaign (1945–1996), polio eradication (1958–1961), AIDS prevention (1988–1990), and domestic violence prevention (1994 to present). However, there is no silver bullet or magic formula in producing effective communication campaigns.

**Health Communication Campaigns**

Communication is a critical tool in health care awareness and education, and the campaign approach is a necessity in health communication. If health communication is understood to mean the use of communication strategies to inform choices that influence health (CDC 2011), health communication campaigns must imply the strategic devices for influencing target audiences with messages designed to promote positive health-related knowledge and decisions.

To resolve the many health-related problems of our contemporary society through personal conviction or public enlightenment, it is important to create consistent messages that the audience can understand and embrace. A campaign approach to health communication can help the health communicator design and disseminate effective messages consistently and strategically. Health communication campaigns can take many forms, address different objectives, and use a variety of media. They are usually designed:

1. To influence people’s beliefs and actions toward their health or the health of others.
2. For specific target audiences or groups, and hardly for the entire population.
3. For implementation within a particular span of time.
4. To be integrated with various media and other communication efforts to educate an audience about a health-related topic (Rogers and Storey 1987).

Both the mass media and personal influence are useful channels for health communication campaigns. Ideally, they should complement each other instead of being used in isolation. It is foolhardy to organize health communication campaigns that disregard personal influence through face-to-face communication although the power of the mass media in reaching mass audiences is unquestionable. Mass media campaigns are ideal for creating awareness, especially in emergency and crisis situations, while personal channels are more effective in situations requiring persuasion, attitude change, and behavior modification. The mass media tend to have an upper hand in health communication campaigns that require mass audience exposure, reliance on public discussion as a means of public education, and needing the support of media authorities or agenda setters to support the message (NHS Health Development Agency 2004).
Although many health problems such as outbreak of disease epidemics and the gradual pervasiveness of cardiovascular disorders deserve and demand the use of campaign approaches, in some situations, this may be an overkill, as a set of mediated simple messages may suffice. The fight against polio in Nigeria has been waged through a variety of health campaign approaches, with less sterling results to show for the huge efforts that have often involved local and international partners working in concert in comprehensive campaign modes. More encouraging results have been achieved by the President of Nigeria leading the Minister of Health and the Commissioners of Health in polio-affected states in noncampaign but impactful efforts to wipe out polio from the country (Eze 2013).

The chances for success in health campaigns increase with the use of multiple strategies and paying attention to the circumstances of the target audience, relating interventions to theoretical and tested models, providing appropriate and clear information, and ensuring there are resonant choices and options available for audience members’ consideration (NHS 2004). It helps a great deal to have a well-structured and comprehensive campaign plan that is built on a solid structure with the standard steps associated with communication campaigns. Designing a health communication campaign usually involves planning for a nine-step process that begins with a situation analysis and ends with an evaluation exercise.

Designing a Health Communication Campaign

An effective communication campaign requires a definite structure, usually expressed in these nine elements: (1) situation analysis, (2) goal/objectives, (3) target audience, (4) strategy, (5) tactics, (6) media of choice, (7) calendar/timeline, (8) budget, and (9) evaluation. Research plays a vital role within each of the nine elements. This generic template for communication campaigns is adaptable to specific scenarios in such areas as advertising, fundraising, health, and public relations among others. Underlining the structure is the strategy, which provides direction for all efforts and flavor for all messages. Strategy is the key to a successful campaign. With reference to advertising campaigns whose methods are also applicable in health campaigns, Shultz and Barnes (1995) aver that without strategy there is no campaign, only a series of ads or commercials or communication elements that may thrill the audience without any lasting impressions.

A health communication campaign plan identifies what is to be done, why, by whom, for whom, through what media, within what time frame, and with what results. Such a plan can be as short as two pages or as long as 100 pages. Regardless of the length, it shows that considerable thought has been exercised in designing the plan and that the key people involved in the implementation or supervision understand the purpose and the courses of action. Although research is critical at every phase of the planning and at each stage of implementation, it is the foundation on which all other activities are built. At the precampaign phase, formative
research is essential to guide the initial campaign design. Starting with research helps campaign designers to determine what approach, media, and message are the best fit for the audience. In addition, formative research can help to determine if any messages or media would not enhance the campaign (Atkin and Freimuth 2013).

Qualitative research is especially beneficial during the formative phase of pre-production. The qualitative approach focuses on understanding concepts, meanings, definitions, characteristics, metaphors, symbols, and descriptions that research participants from a targeted group can provide to help the researcher obtain relevant insights from the audience’s perspective (Berg 1989; Morrison 2002). During this phase, focus groups, observations, and in-depth interviews can help the researchers understand the health issue from the audience’s perspective.

**Situation Analysis**

The first step in health communication campaign planning is to analyze the prevailing situation or health problem by dissecting the whole into pieces to separate causes from symptoms and try to locate the true sources of the malignancy. Fortunately, there are usually basic office records such as annual and project reports, periodic assessments, and the views of people in the trenches who are familiar with the situation and can be engaged in focus group discussions or be required to produce their analyses of the situation. Part of analyzing the situation is describing the history of the problem and previous communication efforts that have related to the health issue at hand. Assessing previous failures and successes can help inform a future campaign. At this point, practitioners might want to evaluate the opportunities and problems that their client or employer might face during the course of a new health campaign. Sometimes, paying attention to the specific strengths, weaknesses, opportunities, and threats (SWOT) associated with the situation will bring about desirable insights.

**Goal/Objectives**

A clear analysis of the situation leads to specifying the overarching goal and objectives that should be addressed by the campaign. Goals are broad targets, such as United Nations’ Millennium Development Goal (MDG) of eradicating extreme poverty and hunger and reducing child mortality. Objectives are more specific and amenable to actual measurement such as the MDG target of halving the proportion of people with an income of less than US$ 1.25 a day between 1990 and 2015 and reducing the child mortality rate by two-thirds between 1990 and 2015. Good statements of objectives will be directly related to the situation, realistic and achievable, with clear reference to completion time and evaluation. Whereas some objectives are stated in terms of program achievements or outcomes, others are meant to re-
fer to communication output or activities. The true value of health communication campaigns should be sought in their impact or outcomes and not just in the communication activities or tactics undertaken. It bears pointing out that communication effects are not necessarily dependent or determinable from specific interventions, and so in some situation, the communication professional prefers to be held responsible for delivering the message.

**Target Audience**

The third element in the campaign planning process is delineating the target audience. Health communication campaigns, even when they appear to address the general public, actually are directed toward specific and particular segments of the population. Some campaigns often include more than one target audience and can include both upstream and downstream groups. A detailed description of each of these groups should be provided. The goal of this section is to make the case for the audiences or publics that you intend to reach with your campaign efforts. Attention should be paid to primary and secondary audiences as well as opinion leaders and influencers within social groups. Many health behaviors are related to peer pressure and social group influence. Research is necessary to identify key publics by their demographic and psychographic characteristics as well as by who or what influences their choices.

**Strategy**

A good strategy is critical to the success or failure of any health communication campaign because it provides the linkage between the how and why components. It provides a roadmap and sense of direction for generating the essential messages while also offering a rationale for the various actions that are proposed. According to Schultz and Barnes (1995), another way to explain strategy in a campaign is to see it as a roadmap that tells the whole “team what direction the campaign is going to take. It points the way in terms of what is important; what messages, information, or benefits need to come through; what is valuable; and what must be done if the campaign is to succeed” (p. 149). Part of the strategy may involve identifying and working with strategic partners. Health campaigns are often deeply rooted into communities where many groups express interest. Having the support of such partners as local media, government, and other organizations is essential. Working with such partners can help to engage the community and foster local awareness for the health initiatives by providing opportunities for unpaid media placement and contact with opinion leaders.
**Tactics**

Whereas strategies refer to broad roads on the map, tactics are the small alleys or specific activities that must be undertaken to address the objectives of the campaign. Being specific activities, they are the most visible aspects of the plan. Wilcox and Cameron (2012, p. 156) explain tactics as the “various methods to reach target audiences with key messages” and listed the following as the popular tactical communication tools: the World Wide Web, Web sites, Web casts, blogs, YouTube, Flickr, Texting, Twitter, Wikis, Podcasts, news releases, media kits, e-kits, mat releases, media alerts and fact sheets, electronic news releases, online newsrooms, media interviews, news conferences, media tours and press parties, public service announcements, video news releases, talk shows, magazine shows, product placements, issue placements, open houses, conventions, promotional events, etc. A tactic is a health communication activity or event or occasion designed to achieve a specific effect on target usually for the purposes of realizing a health communication objective. In this age of digital communication, it is easy to combine both traditional mass media and new social media tools in a convergent manner to increase campaign effectiveness. Campaign managers should not be carried away in their choice of tactics and must be guided by the characteristics of the target audience and the nature of the campaign strategy.

**Media of Choice**

Health communication campaigns require the use of the mass media, interpersonal channels, small group meetings, and one-on-one discussions, as the case may be. A good delineation of the target audience makes it easy to identify the best media of choice to reach them and the best time too. A correct media strategy maximizes reach while minimizing costs to yield optimal results. This addresses the efficiency and effectiveness questions in media selection. An effective media plan addresses the traditional media concerns of reach and frequency with the gains and downsides associated with them. Timing can be an important consideration and can refer to seasonality or time of day or “consumer aperture” a term that addresses the question: “when, where and under what circumstances is the customer’s mind most receptive to the selling message?” (Schultz and Barnes 1995, p. 301). Media selection is closely related to tactics and the two can have the same meaning in some situations. In addition to the traditional media of television, magazines, radio, newspapers, outdoor, direct mail, and others such as newsletters and notice boards, we now have to add the new social media of blogs, Twitter, YouTube, and podcasts. The abundance of media at the disposal of the campaign planners necessitates the development of a media flowchart.

The media flowchart provides the timing of all the media and promotions for the entire campaign from its launch to its conclusion. Some media and promotions
are planned to span the entire campaign. However, other media might be pulsed or appear incrementally throughout the campaign. The flowchart shows when and where various messages and promotions will appear. In addition, the media are often phased. Often there is a launch phase where the campaign is being initiated. It is common for the launch to involve the greatest media presence. The second phase is often the body of the campaign. Media are often used incrementally to remind the audience of the message. But, fewer media and promotions are present at this time. The third phase is usually the final media push before the campaign ends. Sometimes, there are special events that mark the end of a campaign or celebrate its success. Campaigns can last any length of time. However, most campaigns run from one to three years. Successful health campaigns can last indefinitely.

**Calendar/Timeline**

The seventh element in the campaign design is the calendar of events or the timeline for implementing the various activities. Depending on the goal, objectives and selected activities, the entire campaign can take as little as 1 week or as long as two years or more. Some campaigns are seasonal or perennial and should be repeated every so often while others are once and for all. A comprehensive calendar shows what should be done, when, by whom, where, and with whom. Calendars and timelines can be expressed in different formats some of which may require daily updating of individual responsibilities and tasks. Gantt charts and Microsoft Excel designs are popular for scheduling and monitoring purposes of timelines.

**Budget**

Health communication campaigns often involve the production of communication materials and the purchase of space and airtime in the media, in addition to paying for consulting services. Cost is a serious element in campaign planning, especially these days of increasing financial problems for health and social services programs all over the world. Many health communication departments have established funding patterns and histories that allow budgets for personnel and production expenses. The challenge is in providing acceptable justification for budget requests and taking full advantage of all possible free media, as long as this does not compromise the results. Campaign planners need to prove that they have allocated the funding efficiently. The budget is often broken down into categories such as promotional expenses, social media and Internet promotion, and traditional media. Campaign planners often leave 5–10% of the budget for contingency purposes in case an unexpected expense or opportunity arises. In addition to showing how the money was spent, campaign planners need to defend their choices. For instance, campaign planners can show that their choices of media reached more of their target audience than another medium for the price. For instance, cost per thousand or CPM is often used
to demonstrate that the choice of media vehicle was efficient. In addition, campaign planners need to estimate how many times an audience is exposed to a message to learn the message and then show that their plan will present the audience with the health message enough times for message learning to occur.

**Evaluation**

The last step in the campaign process is evaluation, which relates back directly to the situation analysis, goal, and objectives of the program. The measures of performance must relate directly to the objectives of the campaign and should use valid and reliable methods. Distinction must be made between output (communication products) and outcome (results and impact of actions taken).

Before a campaign is launched, campaign planners need to show their plans for evaluating the success of their campaign. Usually, research evaluating the campaign is done throughout the course of the campaign to catch any problems as early as possible. All messages must be copy tested to ensure that they are understood and that they resonate with the audience. *Copy testing* involves presenting audience members with the messages and creative executions before the campaign launches. This can be done with focus groups and surveys. Then, campaign planners need to survey the audience during the campaign to make sure that they are learning the message and that the message is having the desired outcome. Finally, when the campaign ends, the campaign can be evaluated to see if it had the desired result and if it should be continued or if major changes should be made to the communication approach.

*Process research* assesses the campaign as it unfolds to ensure that the messages and the media connect with the target audience (Atkin and Freimuth 2013). If there is a problem with a message or a medium during the course of a campaign, certain aspects can be tweaked to ensure that there is a good fit between the audience and the message.

Campaigns can be evaluated in a variety of ways that may include memory tests, persuasion or motivation tests, and inquiry tests that measure the number of responses to a campaign. In addition to testing the messages, campaign evaluation can assess media effectiveness and return on investment or ROI (Moriarty et al. 2009).

**Health Campaign Strategies**

There are a variety of popular strategies for promoting healthful habits in a target audience. Some health campaigns focus on *upstream approach* to target their audiences, such as community leaders, government officials, and other influential individuals. The opposite method is the *downstream approach*, two examples of which
are social marketing and social norms campaigns. The two approaches can be used interchangeably or exclusively.

**Upstream Approaches**

Instead of directly targeting a particular audience, sometimes health campaigns target individuals that have *interpersonal influence*, or those who can create change through their relationship with the target audience. Another benefit of targeting this group is that opinion leaders or interpersonal influencers are more likely to have the ability to reform environmental factors that can shape behavior or influence policy and groups that work at the national or community level (Atkin and Rice 2013). Another benefit of influencing opinion leaders first is that the campaign can be more proactive because it causes something positive to happen instead of simply responding to a problem or crisis after it has occurred. It also encourages policy makers to take responsibility for health issues that affect the public (Lavack et al. 2008).

However, upstream initiatives might be necessary for downstream efforts to be effective (Kelly et al. 2005). In addition, many campaigns target the upstream audience first and then focus their attention on the downstream audience. It is often best when campaigns involve both upstream and downstream elements.

*Urban Nutrition Campaign in Oakland, CA:* A group of public health professionals were concerned about nutrition in urban areas of Oakland, California. To increase local awareness of healthy eating habits, they designed an educational program to increase fruit and vegetable consumption. However, when the campaign planners realized that the audience could not buy healthy food owing to the lack of grocery stores and farmers’ markets in the targeted neighborhood, the health professionals decided to work with the local government. The local officials convinced Safeway to open a large grocery store (Bournhonesque and Mosbaek 2002). The public health professionals needed to focus upstream first to create the community change that would allow the neighborhood access to healthy food. After creating this environmental change, public health officials could focus on educating the community about nutrition. A health campaign targeting local residents would have been wasted if the upstream audience had not been reached first.

*International Urban Wellness Campaign:* Urbanization is one of the biggest health challenges for the twenty-first century. Since 2007, half of the world’s population has been living in cities. By 2030, six out of ten people will be living in urban areas. Urbanization is related to many health issues such as clean water and environment, injuries and violence, disease, unhealthy diet and inactivity, and substance abuse. To help create a healthier urban environment, the World Health Organization (WHO) developed the campaign “1000 Cities, 1000 Lives” in 2010 to address issues related to urbanization and health. For the “1000 Cities” portion of the campaign, the WHO called upon city officials to open public spaces to health for one day in April. Cities around the world were encouraged to promote activities in the parks, conduct town hall meetings, engage in clean-up campaigns, and close off streets to
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