

Briefing Paper

Executive Summary

**Research Informing Message Strategy of
Chronic Disease Prevention and Control Consumer Education Campaign**

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February 1, 2007

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Executive Summary

A disproportionate share of Missourians and other Americans of lower income have or are at risk of chronic diseases such as heart disease, cancer, and diabetes. The ultimate goal of the Chronic Disease Prevention and Control Consumer Education Campaign is to positively affect health and health care behaviors that contribute to prevention, early detection, and management of chronic disease. The target market is Missourians ages 45 to 64 who are at risk or have chronic disease. Targeted *health* behaviors include healthy eating, regular physical activity or exercise, and not smoking. Targeted *health care* behaviors include timely health screenings for chronic disease, regular physician check-ups, and ongoing self-monitoring and self-management.

The purpose of the research and recommendations in this briefing paper is to inform development of a general thematic message and supporting submessages for the media campaign, educational materials, and grassroots partners. The general thematic message (and submessages) will fit within MoCAN's overarching message of "Be Active, Eat Smart, Feel Better" and support existing submessages for chronic disease. Grounded in empirically-based health communication theory, this research examined knowledge, beliefs, and social norms in the target market or general population related to the targeted health and health care behaviors. It also examined individual-level perceived self-efficacy or confidence in achieving these behaviors, recognizing the additional disproportionate structural barriers such as lack of health insurance that many members of the target market face. Additionally, several research-supported message strategies are recommended along with media and grassroots message channels utilized by the target market. Recommendations from the research will be tested in a telephone survey and alternate messages will be tested in focus groups.

Health Behaviors

Knowledge of or belief in the benefits of healthy nutritional habits and especially regular physical activity in preventing chronic disease does not appear to be strong in the target market. The risks of smoking are well known but it appears that, although many see it as a risk factor for lung cancer, they do not see it as a risk factor for other chronic diseases. The research supports use of gain-framed messages in promoting *health* behaviors. These are messages stressing the benefits of the behaviors. Evidence-based messages should make vivid the benefits of healthier eating and increased physical activity in preventing chronic disease and, for those already with chronic disease, in slowing down the development of their disease. Messages should make clear that quitting smoking, even late in life, has significant benefits in preventing or lessening the effects of chronic disease.

In addition, research recommends messages aimed at *health* behaviors that try to increase the self-efficacy or confidence of members of the target market that they can do what is being promoted. This includes recognizing the barriers to these behaviors, which include lack of time and feelings of being overwhelmed by the enormity of the tasks. Messages should include evidence of the benefits of small steps over time. Other ways to increase self-efficacy include reminding people of their other accomplishments in life – "You've done [x], you can do this" – and convincing them how good they will feel, including emotionally, about accomplishing the

behaviors. This includes an approach that, in essence, celebrates the journey and not just the final outcome (of, for example, losing “x” pounds).

Health Care Behaviors

The research supports a different message strategy for the *health care* behaviors of compliance with screenings and regular physician visits. For these behaviors, loss-framed messages that stress the costs of not doing the behavior have been shown to be more effective. Messages aimed at screening compliance should stress the costs, in terms of health and quality of life, of not detecting disease early. Messages should stress not waiting for symptoms before getting screened – that early detection is often accomplished when there are no symptoms.

Research supports the effects of “important others,” including physicians and family members, in pressuring individuals to get their screenings. Data indicate that people generally know they are supposed to get screenings but do not know at which age and how frequently. The campaign should consider cards for physician offices or provided to target market members that physicians can quickly mark to indicate the individualized screenings schedule for a patient. Messages should encourage people to “Ask your physician” and be proactive in finding “which, when, and where” in terms of their own screenings. Available alternate ways to receive screenings should be communicated for those in the target market without insurance.

Channels

Research supports use of the media channels of especially television but also newspapers for the target market. More detailed messages and information can be provided in pamphlets. Some health campaigns do not have their desired effects because of lack of message exposure. Message exposure should be maximized using multiple media channels and the campaign’s partnership network. Additionally, news coverage should be pursued. Coverage of health behavior stories is rare in the news, and this presents an opportunity for cost-effective dissemination of the campaign messages. This may include stories of individuals of the target market successfully incorporating the behaviors in their lives and attesting to the benefits.

Thematic Message and Submessages

Of course, most of these messages will be campaign submessages as they cannot all be communicated in the single thematic message. The thematic message will have to be broad, as it needs to speak to people with and without chronic disease, ages 45 to 64 and 65 and above, about both gain-framed health messages and loss-framed health care messages. The research supports a gain-framed thematic message that communicates the benefits of a general health orientation that would include the targeted health and health care behaviors as well as other behaviors of health living. An example, along with recommended submessages, is provided in the report. The broader message will be supported by specific submessages. A thematic message that is more specific may be pursued, keeping in mind the diverse messages it needs to support and audience segments it needs to speak to, and its relation to the overarching MoCAN message.