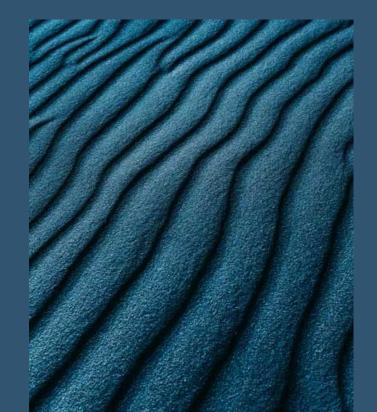
## Capacity: Expertise and Human Capital



### Capacity: Expertise and Human Capital

Moderator: William Hallman (Chair), Rutgers University

### Panelists:

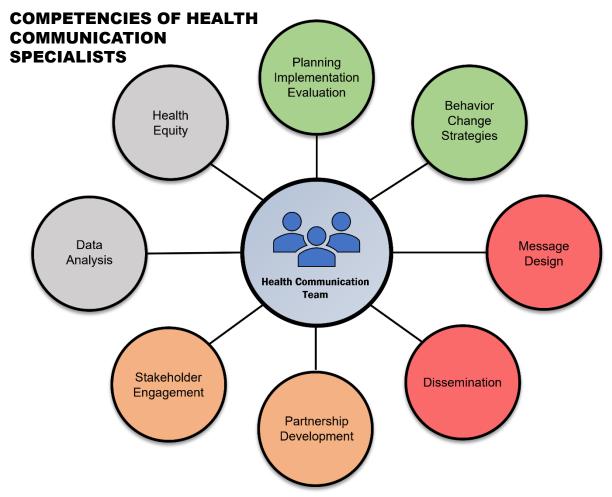
Itzhak Yanovitzky, Rutgers University

Sandra Quinn, University of Maryland

Amanda Boyd, Washington State University

Sarah Gollust, University of Minnesota

Robert Hornik, University of Pennsylvania



#### **CAPACITY-BUILDING DOMAINS**

#### Professionalization

- · Professional standards and accreditation.
- Training, professional development, and career paths.
- Established links with professional associations and communities of practice.

### **Expert and Technical Support**

- Institutionalized access to health communication expert panels.
- Timely access to relevant audience/market research and a message pretesting platform.
- Access to a creative design team for producing accessible, actionable, and tailored communication products.

### Coordination and Outreach Support

- Ability to coordinate messaging and outreach activities across government agencies.
- Access to in-house media/PR, community, and/or stakeholder outreach professionals.
- Ability to leverage collaborations with external partnerships to support key health communication functions or tasks.

### Department of Family Science School of Public Health

## **Building Capacity for Effective Health Communication**

Sandra Crouse Quinn, PhD March 21, 2023 scquinn@umd.edu



### What are your goals for communication?

- Federal level
  - Set a national agenda or norm?
  - Increase awareness and knowledge?
  - Prompt resource use and information seeking?
  - Change behavior?

### Necessary capacities at the federal level

- Understand that health communication is not messaging.
- Train leadership in crisis and emergency risk communication!
- Utilize clear communication index & health literacy tools to translate science into tools/resources.
- Train a workforce to understand how to track, and counter mis and disinformation.
- Recognize that diversity in every sense plays a role in the health communication exchange.



### What are the goals of state and local government?

- Set a agenda or norm?
- Increase awareness and knowledge?
- Prompt resource use and information seeking?
- Change behavior?
- Collaborate with partners?

## Critical capacity: Develop and sustain community engagement and partnerships

- Recruit, train, support and effectively utilize community health workers (CHW).
- Work with CHWs & community partners to determine culture, channels, information needs, potential messages, etc. for effective health communication.
- Work with CHWs & community partners to determine what it means for local or state government to be seen as trustworthy.

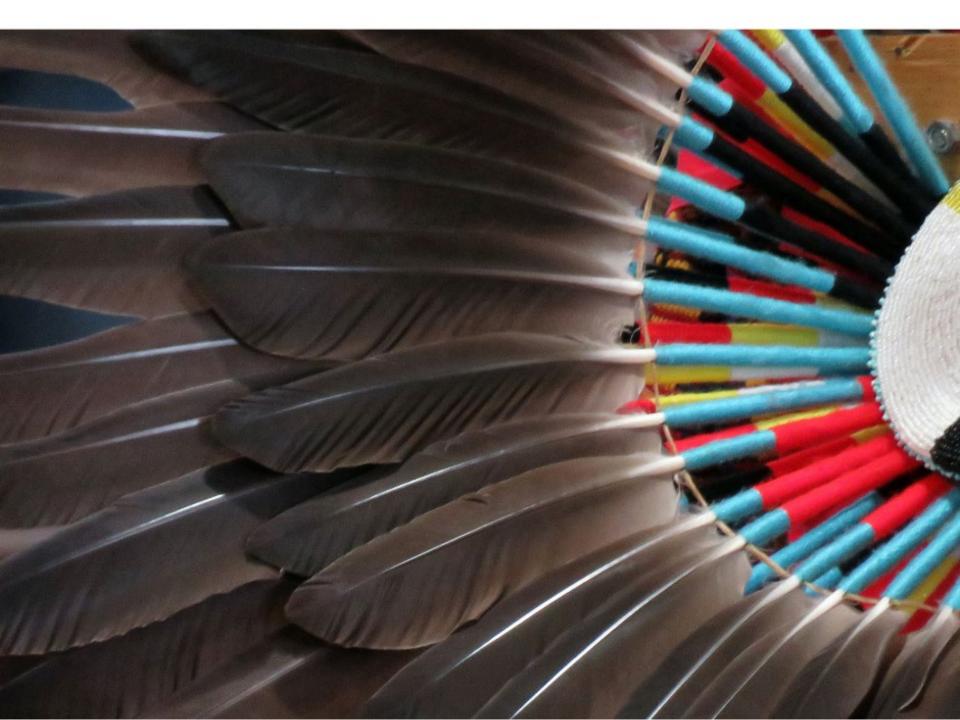


### Investment in the workforce

- Public health traineeships
- Pre and post doctoral fellowships in key areas such as health communication, CERC, health literacy, social media and countering mis/disinformation
- Pre and post doctoral fellowships in public health preparedness and response research & translation

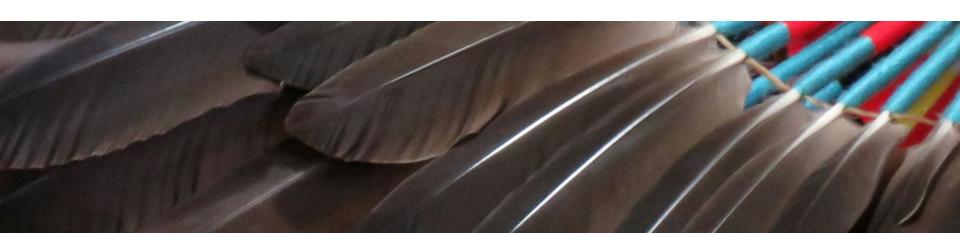
Sandra Crouse Quinn, Ph.D.
Professor and Chair, Department of Family Science
Senior Associate Director, Maryland Center for Health
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College Park, MD

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## Work with Native communities.

Honor experience, expertise, and Indigenous knowledge.



### Successful health communication campaigns involve (or are led by) the affected population

- Messaging is more likely to be trusted
  - (e.g., Facebook, CDC messaging)
- Understand barriers and information seeking
- Able to incorporate cultural and traditional norms





Dr. Kim Hartwig (Nez Perce) Medical Director at Nimiipuu 4 Health

Dr. Kim Hartwig (Nez Perce, Health Director at Nimiipuu Health, encourages social distancing during the Coronavirus pandemic.

## Successful health communication campaigns involve (or are led by) the affected population

- Outside agencies or researchers may not:
  - have access to important local knowledge,
  - understand what affected parties care about,
  - be aware of behaviors that affect exposure to a hazard.
- Need to include urban, rural, and reservation

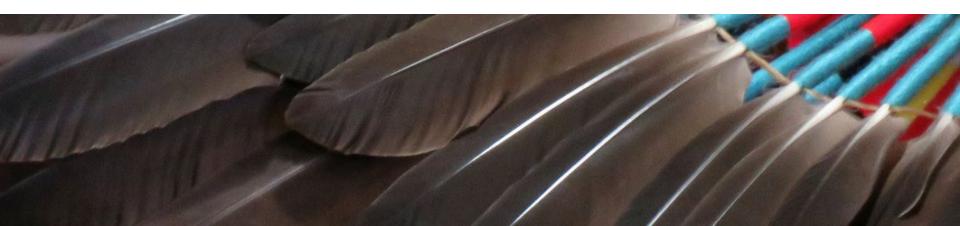






Source: Urban Indian Health Institute

## How do we make it happen?



### Connecting federal agencies to communities.

- Existing expertise, boundary spanners (e.g., THRO)
- Funding sources and initiatives (e.g., CEAL, RADX)
- Learning from successes and challenges (particularly around COVID-19 initiatives)
- Representation throughout process
  - Who is at the table, who makes decisions?

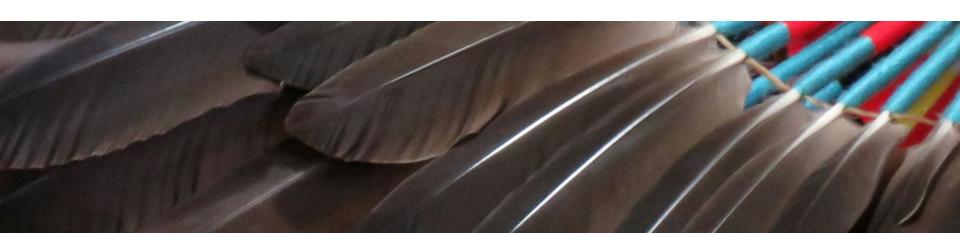






## Find or develop the skills needed.

Can listen, build relationships, know the history.



### Skills needed for community engagement with Native communities.

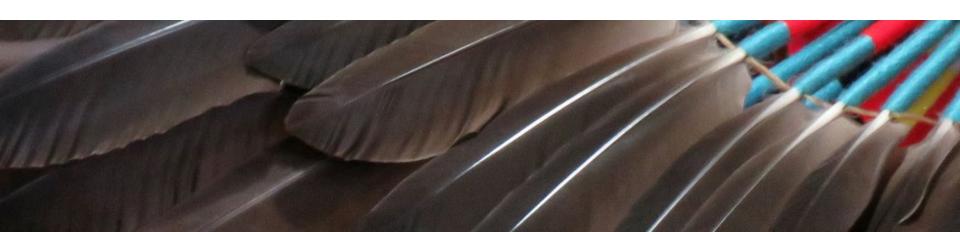
- Ability to listen, build relationships and trust
- Know the history of relationships
- Sovereign Nations "the essence of tribal sovereignty is the ability to govern and protect and enhance the health, safety, and welfare of tribal citizens within tribal territory "-NCAI
- Value different backgrounds, lenses







# Communities. Connect. Skills.



## Expertise and Human Capital: Engaging News Media

Sarah Gollust

March 21, 2023, National Academies of Sciences, Engineering, and Medicine Effective Health Communication within the Current Information Environment



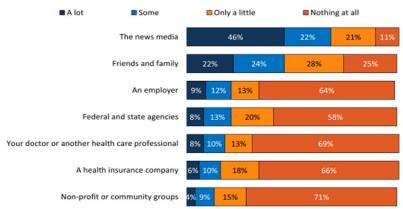
### **Key Points**

- Americans rely on news media for health information
- Trust varies across information sources cited in news
- Improving health communication in news requires engagement and strategy for federal government communicators

### Reliance on News for Health Information

### **Public Reports News Media As Primary Source Of Information** About The ACA

Please tell me how much you have heard about the health care law from this source over the past month.



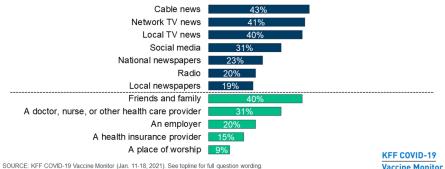
NOTE: Don't know/Refused answers not shown. SOURCE: Kaiser Family Foundation Health Tracking Poll (conducted February 11-17, 2014)



#### Figure 1

### TV News Tops Media Sources For COVID-19 Vaccine Information, Friends And Family Top Personal Sources Of Information

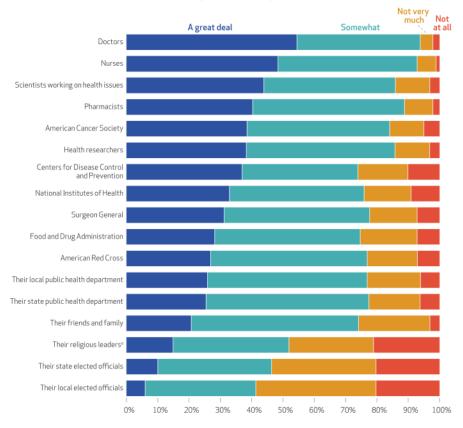
Percent who say they have gotten at least a fair amount of information about the COVID-19 vaccine from each of the following sources in the past two weeks:



2021 2014



#### Public trust in sources of health information among US adults, by degree of trust, 2022



**SOURCE** Authors' analysis of data from a February 2022 nationally representative online and telephone survey of 4,208 US adults. **NOTES** Weighted percentages are displayed. Survey question: "In terms of recommendations made to improve health in general, how the do you trust the recommendations of each of the following groups? A great deal, somewhat, not very much, or not at all?" All respondents were asked about trust in the Centers for Disease Control and Prevention and in their state and local health departments. In addition, respondents were asked about trust in 10 additional groups, selected randomly from a list of 14 (n = 2,026–2,168). Appendix exhibit A2 presents a detailed version of exhibit 1 containing the percentage values (see note 19 in text). 'n = 1,606, excluding respondents who reported that religious leaders are not relevant to them.

### Paying Attention to Sourcing in News is Key, Given Trust Patterns

- Politicians most common sources cited in news (COVID-19, ACA)<sup>1</sup>
- Can contribute to polarized responses among the public
- Referring media to sources trusted in communities is critical

Figure from Steelfisher et al. (2023) Health Affairs

<sup>1</sup>Xu et al. (2022) *Race Soc Prob*; Gollust et al. (2020) *JHPPL* 



### Gaps in News Coverage and Recommendations

| Gap Observed from Research on News Media <sup>1</sup>        | Recommendations for Communication Strategy   |
|--|--|
| Sources cited in news not necessarily trusted                | Refer, build relationships, wider network  |
| Appearance of "conflicting" science and recommendations      | Provide substantive context about scientific progress & evolution; acknowledge uncertainty |
| Inconsistent messaging, misinformation, information overload | Media training, relationship-building & engagement with journalists earlier                |
| Disparities statistics / exemplars frequent                  | Emphasize structural causes and solutions in health equity coverage                        |

<sup>&</sup>lt;sup>1</sup>News media content analyses, public opinion studies, qualitative interviews with journalists



### Looking Forward to the Discussion

Thank you!

