

Minnesota Department of Health

Chronic Disease Reduction Unit



Health Communications Capacity Project: Technical Assistance Training

Prepared by DeYoung Consulting Services

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SHIP Messaging Puzzle

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N S Q U P Y U H W H Z S Y T L
N U G P C Z Z T E E Y S N E A
U Z T I D W L L V S L E P X T
K X L R V Y H A T S M Z R E N
P O P L I L F E F E G A Q R E
P U H S X T M H V C B O G C M
W V Q Q H S I O V N W C I I N
Y E Q P P I R O D H I U V S O
M Q F P D P P X N C Y G I E R
Z A C N M S T A T E W I D E I
M Q R I Y T I S E B O E S E V
D B A G C H A N G E L Z W V N
F G T U O V Y D Q R U Y J C E
V C D J O R I N E L F O C W Q
N T I E K Y P T D D C E L T Z

CHANGE
ENVIRONMENTAL
EXERCISE
HEALTH
IMPROVEMENT
NUTRITION
OBESITY
POLICY
PROGRAM
SHIP
STATEWIDE
SYSTEMS

SHIP Messaging Puzzle

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Solution

```
N + + + + Y + H + + + S + T L
+ U + + C + + T + + Y + N E A
+ + T I + + + L + S + E + X T
+ + L R + + + A T + M + + E N
+ O + + I + + E + E + + + R E
P + + S + T M H V + + + + C M
+ + + + H S I O + + + + + I N
+ + + + + I R O + + + + + S O
M + + + + P P + N + + + + E R
+ A + + M S T A T E W I D E I
+ + R I Y T I S E B O + + + V
+ + + G C H A N G E + + + + N
+ + + + O + + + + + + + + E
+ + + + + R + + + + + + + + +
+ + + + + + P + + + + + + + +
```

(Over, Down, Direction)

CHANGE (5, 12, E)

ENVIRONMENTAL (15, 13, N)

EXERCISE (14, 2, S)

HEALTH (8, 6, N)

IMPROVEMENT (4, 11, NE)

NUTRITION (1, 1, SE)

OBESITY (11, 11, W)

POLICY (1, 6, NE)

PROGRAM (7, 15, NW)

SHIP (4, 6, SE)

STATEWIDE (6, 10, E)

SYSTEMS (12, 1, SW)

Objectives

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- **Share findings regarding public perception of obesity, its causes and how it should be addressed**
- **Present best practices for health-related messaging**
- **Offer suggestions for communicating effectively with target audiences**

Introduction

5

In 2009, a communications firm assessed local public health's communications assets and needs as they approached obesity work, implementation of the State obesity plan, and SHIP interventions. Key findings included the need for training and capacity building in communications strategies.

Introduction

6

DeYoung Consulting Services (DCS) was engaged to build capacity for SHIP grantees by enhancing their communication skills, practices, tools, and assets.

Introduction

7

DCS was charged with the creation of key messages that SHIP grantees could incorporate into communication efforts to their target audiences.

These messages were to be based on findings from an assessment process conducted by DCS and research previously completed by Blue Cross and Blue Shield.

Study Design

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Our intention was to gather information regarding:

- **Views on obesity, its causes and potential solutions**
- **The role of government in creating policies to prevent and address obesity**
- **Preferences in terms of language usage**
- **Ideas regarding effective messaging**

Study Design

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**The process involved quantitative and qualitative data collection methods.
The process included:**

- ✦ **Focus groups**
- ✦ **Stakeholder survey**

Distribution of Focus Group Participants

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Focus Group	Number of participants
African American	6
Asian	12
Dodge County	11
Edina	6
Latino	12
Minneapolis	9
Native American	12
St. Cloud	7
St. Paul	10

Survey Dissemination

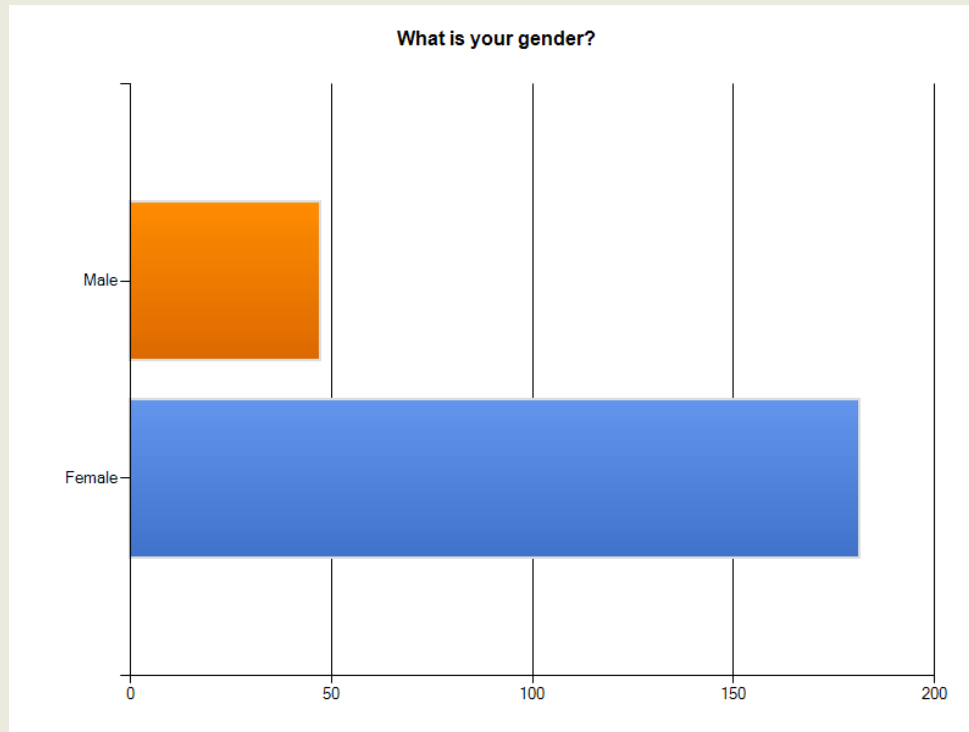
11

- An electronic survey was disseminated via Survey Monkey.
- Persons receiving the survey were encouraged to share the survey with others whom they thought would like to participate.
- A total of 252 people responded to the survey.

Limitations

12

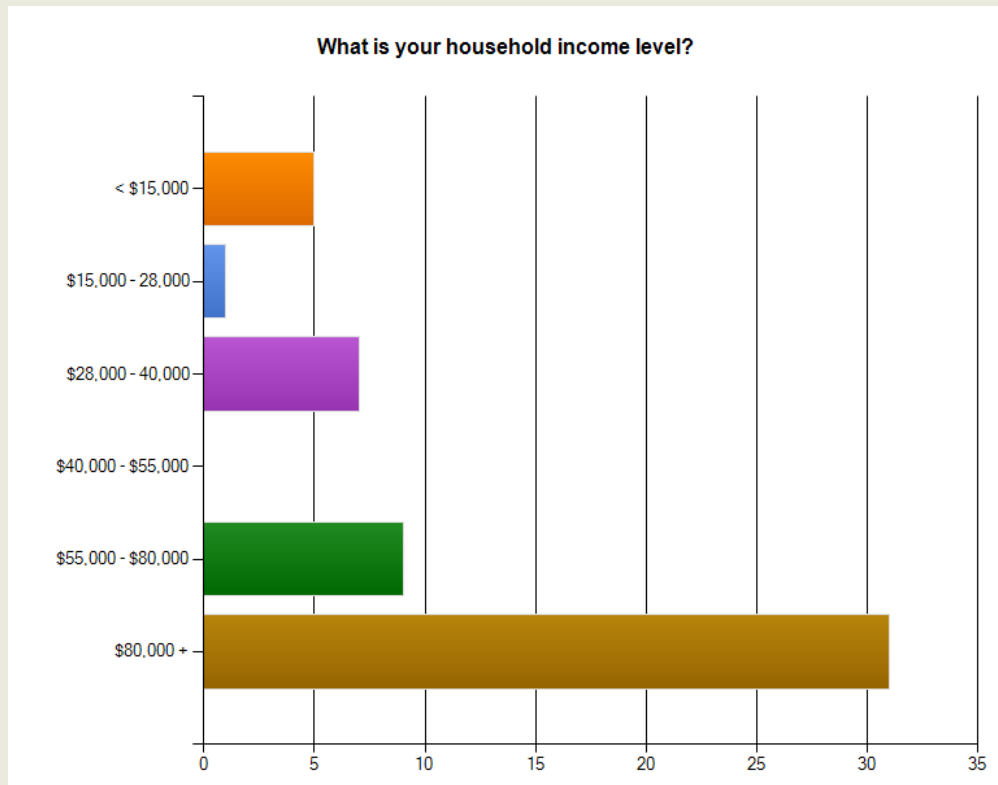
Survey: There were a disproportionate number of respondents who are female...



Limitations

13

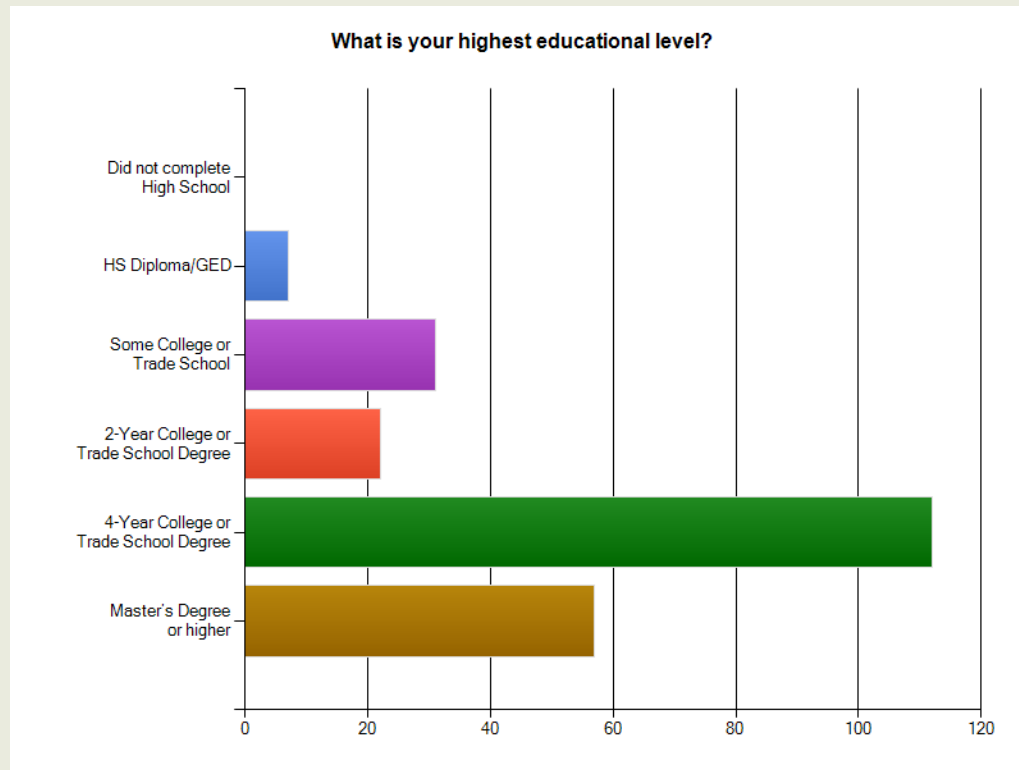
high income....



Limitations

14

and well educated.



Study Design

15

Our intention was to gather information regarding:

- **Views on obesity, its causes and potential solutions**
- **The role of government in creating policies to prevent and address obesity**
- **Preferences regarding language usage**
- **Ideas regarding effective messaging**

Findings Overview

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Views on Obesity, Its Causes and Potential Solutions

Findings Overview

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- **Society Pays for Obesity**

Most participants believed that obesity costs them financially.

“Personally I’m not obese, but I think it costs me indirectly because I’m a taxpayer. People who are obese have so many health issues like diabetes, heart disease, and that costs taxpayers money by making health insurance premiums higher.”

Findings: Overview

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This perspective was corroborated by the survey responses:

1. How strongly do you agree or disagree with the following statements? [Create Chart](#) [Download](#)

	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree	Rating Average	Response Count
The costs of obesity affect everyone in society.	1.6% (4)	3.3% (8)	3.3% (8)	36.2% (88)	55.6% (135)	4.41	243

Findings: Overview

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A few focus group participants felt that statistics overwhelmed, rather than swayed, them.

“No. It is such an inconceivable amount of money and impact. I don’t think it does register. Like smoking, it’s easy for people to rationalize that it’s not about me. When you eat like that you have to justify it somehow, so you don’t think those statistics relate to me.”

Findings: Overview



Some participants spoke of the non-monetary costs, such as emotional and psychological costs and a poorer quality of life.

“There is a cost in terms of quality of life for the people who are obese. How has it cost me? And it does in things like a sibling or friend who can’t do things – I called a friend to do the Alzheimer’s’ Walk with me, but she couldn’t do that because (she is obese and) her knee is bad.”

Findings Overview

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- **A Myriad of Factors Contribute to Obesity**

Participants listed a number of factors that have helped increase the rate of obesity, including love for and dependence on technology, cultural factors, such as changing social values and norms, lack of nutrition education and concern for physical safety.

Findings: Overview

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Factors Contributing to Obesity: Societal

Cultural, economic and lifestyle factors that combine to set the stage for obesity are pervasive.

“The world we live in today; everything wants to be instantaneous; people don’t want to work to exercise. The same thing with eating right; you can go down the street and get a meal quick; you don’t want to take the time to cook. American’s a little lazy in some respects.”

Findings Overview

23

Survey respondents indicated that they felt obesity is a result of both societal factors *and* individual choice.

1. How strongly do you agree or disagree with the following statements?



Create Chart



Download

	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree	Rating Average	Response Count
I think most people who are obese are obese because they make poor choices.	4.8% (12)	18.9% (47)	18.1% (45)	48.2% (120)	10.0% (25)	3.40	249

Findings Overview

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Factors Contributing to Obesity: What About the Children?

Focus group participants agreed that the same societal pressures that adults face also affect children.

“My daughter cooks very nutritious for her kids but then they won’t eat it. She gives in and they eat something else (pizza, snacks, pizza rolls). She packs them little carrots or fruit in their lunch then it comes back. So what do you do?”

Findings Overview

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They also recognize an opportunity to have a long-term impact on the problem of obesity in our state if the groundwork can be laid for children to develop healthy habits of nutrition and active play.

“I think it’s a problem that starts very young, not just in family but in schools. Being thin or keeping your weight down is not a subject we teach. It’s just like we don’t teach how to use money. We don’t teach what good foods to eat. We don’t talk about the costs of overeating, or eating bad food. So a lot of people don’t learn this until it’s too late. So fat kids become obese adults.”

Findings Overview

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There was general agreement that changes in schools “from when they were growing up” have increased the rate of childhood obesity.

“I think schools are key. What happens in the school affects the kids. And it won’t undo the bad things that happen at home, but it will at least offer an alternative to what they get at home. “

Findings Overview

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In more general terms, survey respondents believed that external forces contributed to the increase in childhood obesity.

1. How strongly do you agree or disagree with the following statements?

[Create Chart](#) [Download](#)

	Strongly Disagree	Disagree	Not Sure	Agree	Strongly Agree	Rating Average	Response Count
Our community's social and physical environmental plays a part in the increase of childhood obesity.	0.8% (2)	5.4% (13)	12.0% (29)	49.6% (120)	32.2% (78)	4.07	242

Findings Overview

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Factors Contributing to Obesity

Focus group participants noted a number of factors that increase levels of obesity, including:

- Structural and societal transportation factors
- Genetic predisposition, a view strongly held in communities of color

Findings Overview

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Factors Contributing to Obesity

Focus group participants noted a number of factors that increase levels of obesity, including:

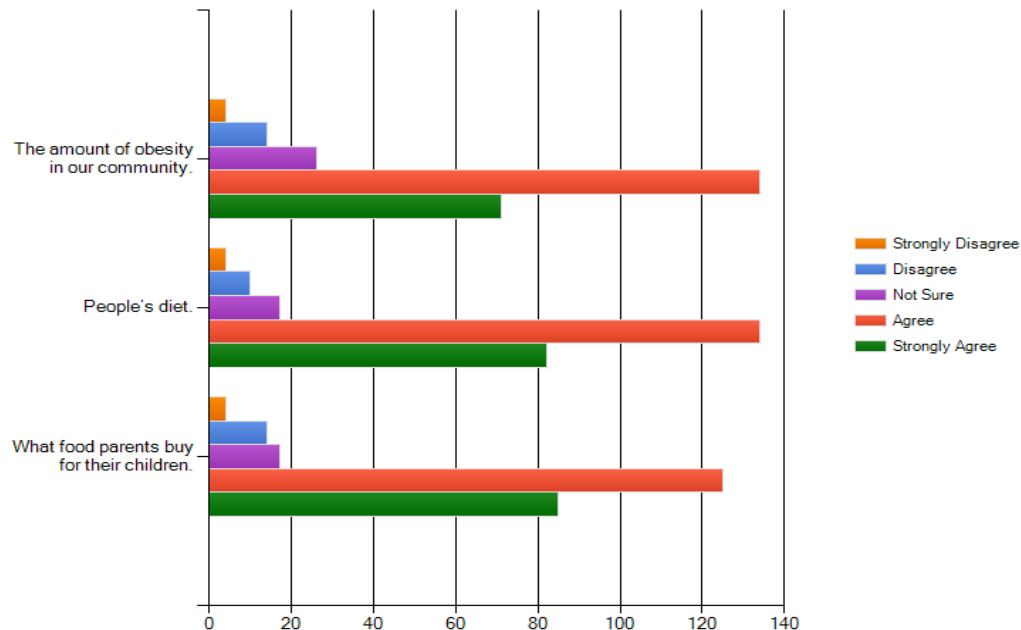
- Food subsidies/commodities given to the poor
- Economic/power of food producers

Findings Overview

30

Survey respondents believed food marketing and advertising significantly influenced buying and food consumption habits.

Food marketing and advertising significantly influences:



Findings Overview

31

- **Behavior Change Requires Support**

Focus group respondents generally supported ideas that provided community and peer support.

“I agree though that to have meetings where people get together, where you can find partners and supporters to help would be motivating. Make it community-based.”

Questions

32

- Did any of the findings surprise you?
- Do you have a different perception of public attitudes?



Findings Overview

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The Role of Government in Creating Policies to Prevent and Address Obesity

Findings Overview

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- **Government Policy Development**

Most focus group participants believed that the government should be involved in creating policies to address issues of obesity, nutrition and health, but they were not in agreement to what degree.

“I think the fact that we have a government, it’s partially their responsibility to take action to take away obesity through school lunches and other things you’ve mentioned.”

Findings Overview

35

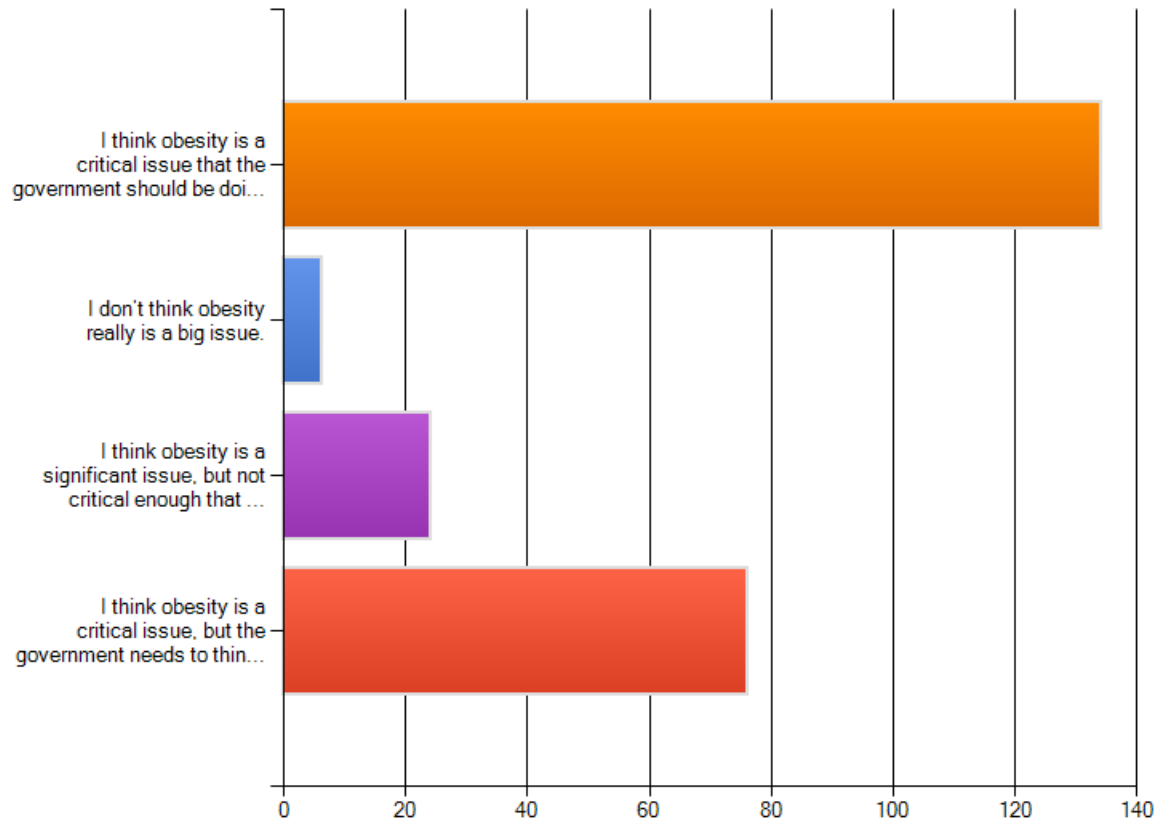
Most survey respondents concurred that the government should be involved in creating public policy regarding issues that affect obesity. The degree of support was as follows:

- Poverty
- Food industry's influence
- Transportation

Findings Overview

36

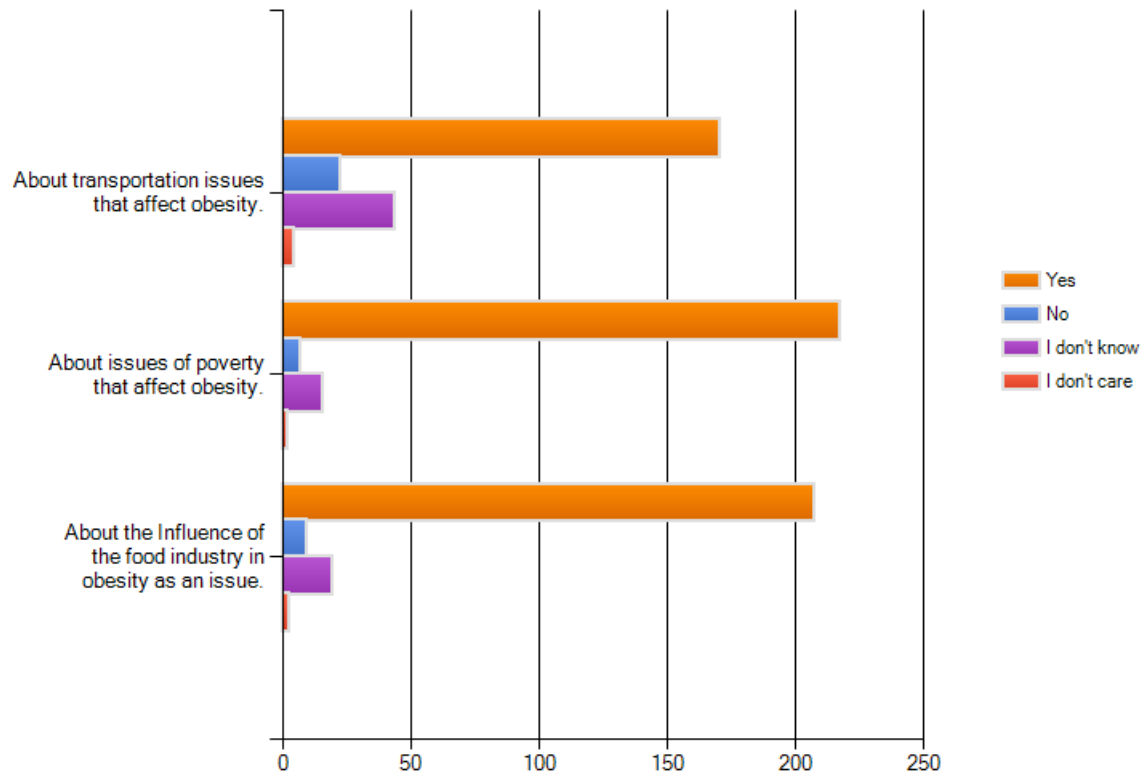
Which best describes your position? (Select one)



Findings Overview

37

Thinking about public policy, please respond to the following statements with the most appropriate response. I think health experts should be at the table when policies are formed:



Findings Overview

38

Government Policy Development: Transportation

Focus group participants offered a mixed response when asked about the relationship between transportation policy and health. Some groups felt that transportation is an important policy component in healthy lifestyles.

Findings Overview

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Government Policy Development: Nutrition and Fitness Education

Policies that focus on providing education about nutrition and fitness to parents and adults were generally accepted.

“There needs to be education to teach children what is nutritious; we need programs to educate. Pictures need to reflect my community and culture. We need to teach them how to cook”.

Findings Overview

40

Government Policy Development: Access and Availability of Healthy Foods

Focus group participants supported programs that increased the ease of finding and buying fresh foods.

“This is the only country I’ve seen where it’s more expensive to buy healthy foods instead of processed food...”

Findings Overview

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Government Policy Development: Lack of Agreement on Policy Creation

Not all believed that policies alone can make a difference.

“There’s certainly a balance here. You can create the framework and guidelines; you can create all the infrastructure you want, but if you don’t get the people to react to those, you’re doing it for naught.”

Questions

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- Were there any surprises?
- How could this information shape how you deliver messages to your community?



Findings Overview

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Preferences Regarding Language Usage
Ideas Regarding Effective Messaging

Findings Overview

44

Most focus group participants believed that public communication should combine the messages of nutrition and physical activity.

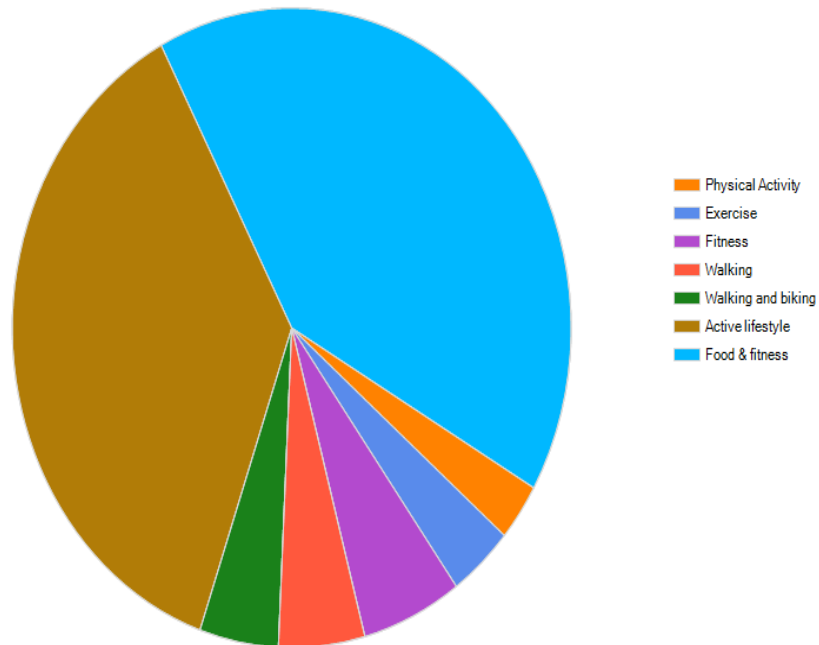
“Both are important – if you only have one you won’t be healthy. There should be both. Depending on the setting, discussing both might be a lot to throw at people, but it’s best to talk about both together.”

Findings Overview

45

Survey respondents seemed to be more drawn to messages that speak to an overall lifestyle.

Thinking about physical activity: Imagine that a well-known fitness expert was speaking at a special event in your neighborhood. Which of the following words or phrases should the speaker be sure to include in the title of this program to motivate you to attend? Choose one:



Findings Overview

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A few focus group respondents noted that combining messages might be less effective than a planned, step-by-step program of delivering messages about staying a healthy weight.

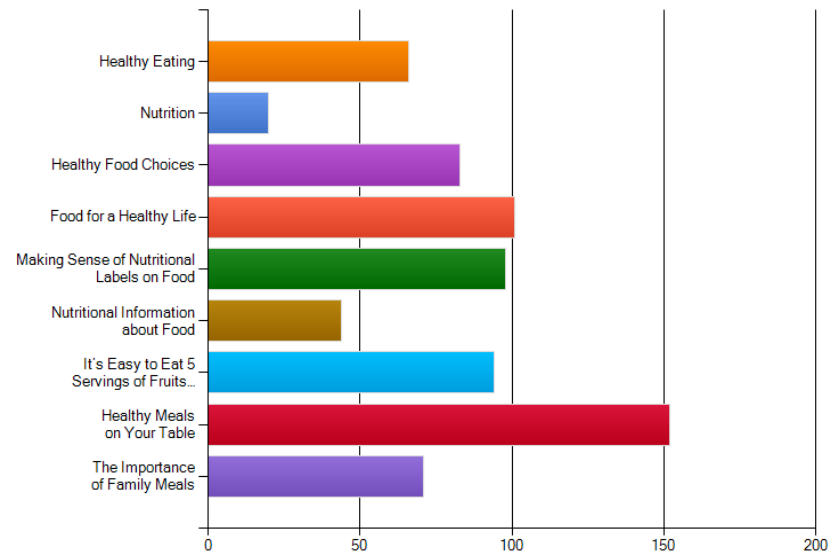
“But if you’re talking to someone who does neither, and they eat bad and they don’t exercise, to think about both ---” “Overwhelming!”

Findings Overview

47

When asked about a preference for nutrition related topics, survey respondents chose those titles that involved knowledge and skills that would be applicable in their day-to-day lives.

Thinking about nutrition: Imagine that you are at the doctor's office with half an hour to wait for your appointment. There are brochures to look at with the following titles. Choose three brochures to read.



Findings Overview

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Survey respondents also expressed their preference for health improvement program names.

3. To what degree would a program with the following names interest you? [Create Chart](#) [Download](#)

	Very Interested	Interested	Not Very Interested	Not at all Interested	Rating Average	Response Count
Make the healthy choice the easy choice.	36.5% (88)	50.6% (122)	10.0% (24)	2.9% (7)	1.79	241
Exercise your right to feel better.	27.3% (65)	54.2% (129)	14.7% (35)	3.8% (9)	1.95	238
Small changes can have big effects on health	30.6% (74)	43.8% (106)	22.3% (54)	3.3% (8)	1.98	242
Statewide Health Improvement Program	15.0% (36)	32.5% (78)	35.8% (86)	16.7% (40)	2.54	240
Individual solutions for individual problems. Community solutions for community problems	14.7% (35)	36.6% (87)	35.3% (84)	13.4% (32)	2.47	238
Minnesota Physical Activity and Nutrition Program	13.4% (32)	38.1% (91)	36.8% (88)	11.7% (28)	2.47	239
Eat better. Move more.	42.1% (101)	41.7% (100)	11.7% (28)	4.6% (11)	1.79	240
					answered question	244
					skipped question	8

Findings Overview

49

They also reflected on their understanding of terminology often used in the public health community.

1. If a speaker gave a talk and used the following terms or phrases, would you know what they meant? [Create Chart](#) [Download](#)

	Yes	I think so	I don't think so	No, not at all	Rating Average	Response Count
Healthy Living	76.1% (181)	21.4% (51)	1.7% (4)	0.8% (2)	1.27	238
Safe Routes to School	73.5% (175)	16.0% (38)	8.8% (21)	1.7% (4)	1.39	238
Farm to School	46.6% (111)	21.0% (50)	23.5% (56)	8.8% (21)	1.95	238
Minnesota Obesity Program	28.0% (66)	35.2% (83)	31.8% (75)	5.1% (12)	2.14	236
Active Schools	37.4% (89)	35.3% (84)	23.1% (55)	4.2% (10)	1.94	238
Active Communities	41.8% (99)	36.7% (87)	19.0% (45)	2.5% (6)	1.82	237
Active Transportation	28.7% (68)	31.6% (75)	32.9% (78)	6.8% (16)	2.18	237
Complete Streets	21.9% (52)	16.5% (39)	41.8% (99)	19.8% (47)	2.59	237
Policy, Systems and Environmental Change	27.8% (66)	29.1% (69)	33.8% (80)	9.3% (22)	2.24	237
Worksite Wellness	54.0% (128)	36.7% (87)	7.2% (17)	2.1% (5)	1.57	237
Community Gardens	79.3% (188)	16.9% (40)	3.0% (7)	0.8% (2)	1.25	237
Farmer's Markets	89.0% (211)	9.7% (23)	0.8% (2)	0.4% (1)	1.13	237
Eat Healthy	85.3% (203)	14.3% (34)	0.0% (0)	0.4% (1)	1.16	238
Increasing Access for Non-motorized Transportation	57.2% (135)	29.2% (69)	11.9% (28)	1.7% (4)	1.58	236
Whole Grains	87.3% (207)	11.0% (26)	0.8% (2)	0.8% (2)	1.15	237
Physical Activity	92.9% (221)	6.7% (16)	0.0% (0)	0.4% (1)	1.08	238
Fitness	89.4% (211)	10.2% (24)	0.0% (0)	0.4% (1)	1.11	236
Bike & Walk to School	86.9% (205)	11.4% (27)	1.3% (3)	0.4% (1)	1.15	236
answered question						238

Findings Overview

50

Several groups noted that using stories is an effective way to communicate with the public. They agreed that stories get their attention more easily than statistics.

“Some good stories! (Others: Yes, stories) about doing it right. Something that people can relate to.”

Findings Overview

51

Some thought that humor could work, but may not translate across cultures.

“They should be like our ways so that we can understand. Some of the jokes are not funny. They should use our humor and language.”

Findings Overview

52

Communities of color stressed the importance of health workers coming from the outside getting to know and building trust within the community.

“ (A community member) could be kind of like an interpreter for the community. We don’t speak Spanish, but I think sometimes we need a community interpreter, someone who knows the language and the lifestyle of the community. They are in the community, they live in the community vs. the dieticians I’ve been seeing, they live in the suburbs.”

Questions

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- How can these findings help you design your programs and how you talk about them?



Recommendations

54

Based upon our findings we offer the following recommendations:

- Emphasize the costs of obesity to society, in monetary, sociological and personal terms.
- Develop messages that grab people on an emotional level; use a story that illustrates the human costs of obesity and the diseases related to it.

Recommendations

55

- **If using humor in messaging, use it carefully; though it can be effective, it may not “play well” across cultures.**
- **Combine nutrition and physical activity messaging, but don’t overwhelm the target audience with a mandate for sweeping lifestyle changes. Provide incremental steps people can easily fit into a busy daily routine.**

Recommendations

56

- Messages connecting health and food, such as “Healthy Eating,” “Food for a Healthy Life,” and “Healthy Food Choices” were found to be preferable to “Nutrition.”
- Because there was universal support for providing educational opportunities, building relationships with influencers and decision makers in schools is key. Encouraging them to advocate for improved physical activity and nutrition offerings is critical.

Recommendations

57

- **Be aware of insider language. In general, respondents did not understand terms such as, “Complete Streets,” and “Active Transportation.”**
- **People feel positively about farmer’s markets, community gardens, locally grown fruits and vegetables, and increasing the availability of fresh foods in all neighborhoods. Focus on this in messaging efforts.**

Recommendations

58

- **Build programs that engage groups, and whole communities.**
- **Communities of color welcome health programs, educators, and professionals who come into their communities; but building trust and cultural competence within the community is key.**

Recommendations

59

- When developing relationships and trying to influence behavior change, acknowledge the demands of daily life that play into eating choices and people's level of physical activity.
- Convenience is a primary factor in the choices people make regarding eating and physical activity. Combine the need for healthy behaviors with people's lifestyle needs when creating messages.

Recommendations

60

- **Heighten awareness of the false economy in choosing convenience foods. All groups generally accept as true that healthy foods are more expensive and require more time to prepare, but also acknowledge the false economy of poor quality food.**

Recommendations

61

- **Policies as they relate to poverty and obesity received strong support and should be highlighted. Education regarding advocacy for policies that hold the food industry accountable should also be offered, as well as information on transportation issues.**

Key Takeaways

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- What are your key takeaways from these recommendations?
- In what ways, if any, will you be able to implement them?

