

COMMUNICATION in Health Promotion



Svetlana Cociu, MD
*State University of Medicine and Pharmacy
"Nicolae Testemitanu" Republic of Moldova
Hygiene Department*

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Here is a look at the evolution of communication.



FIRST PAGES:



For more information, visit www.thinkingphones.com

http://en.wikipedia.org/wiki/Smile_sign 2; http://www.yjtimes.com/2013/02/14/cwp65a%3Ain-japan-the-tax-machine-is-an-thing-but-a-misc.html?_r=3 3; <http://www.businesswire.com/news/home/20130420005750/en/SHOJUNippon> 4; <http://www.radiotai.com/ncip-portal/updates/2013/05/05/Email-Deliverables-Report-2013-19-Executive-Summary.pdf> 5; <http://turntablemobile.com/news/press/1319486450/apple-jetty-leadership-six-years-into-the-mobile> 6; <http://www.dailymail.co.uk/US/14171471-portal-story-1> 7; <http://www.cnet.com/news/apple-by-the-numbers-2013-net-store-volume-120m-customer/>



What is communication?

- Is it Transfer, Conveying or Exchange?
- Communication is derived from 'communis' which means COMMONNESS or SHARING.



What is communication?

Latin

Communicare = (to have something in) common

Oxford English Dictionary

“The exchange of information between individuals, by means of speaking, writing or using a common system of signs or behaviour”

Microsoft Encarta Dictionary

2001

What Is Health Communications?

“The art and technique of informing, influencing, and motivating individual, institutional, and public audiences about important health issues. The scope of health communication includes disease prevention, health promotion, health care policy, and the business of health care as well as enhancement of the quality of life and health of individuals within the community.”

Source: Healthy People 2010

What Is Health Communications?

“The study and use of communication strategies to inform and influence individual and community decisions that enhance health.”

Source: Making Health Communication Programs Work, Rev. September 2002, National Institutes of Health/National Cancer Institute

Communication Types

Verbal Communication

Written

Anything conveyed through written symbols such as language

Oral

Oral Comm. Is through any spoken word, either face-to-face or through phone, voice chat, video conferencing or any other medium.

7%

Non-Verbal Communication

Physical Non-Verbal Comm.

Physical nonverbal communication, or body language, includes facial expressions, eye contact, body posture, gestures such as a wave, pointed finger and the like, overall body movements, tone of voice, touch, and others.

Paralanguage Comm.

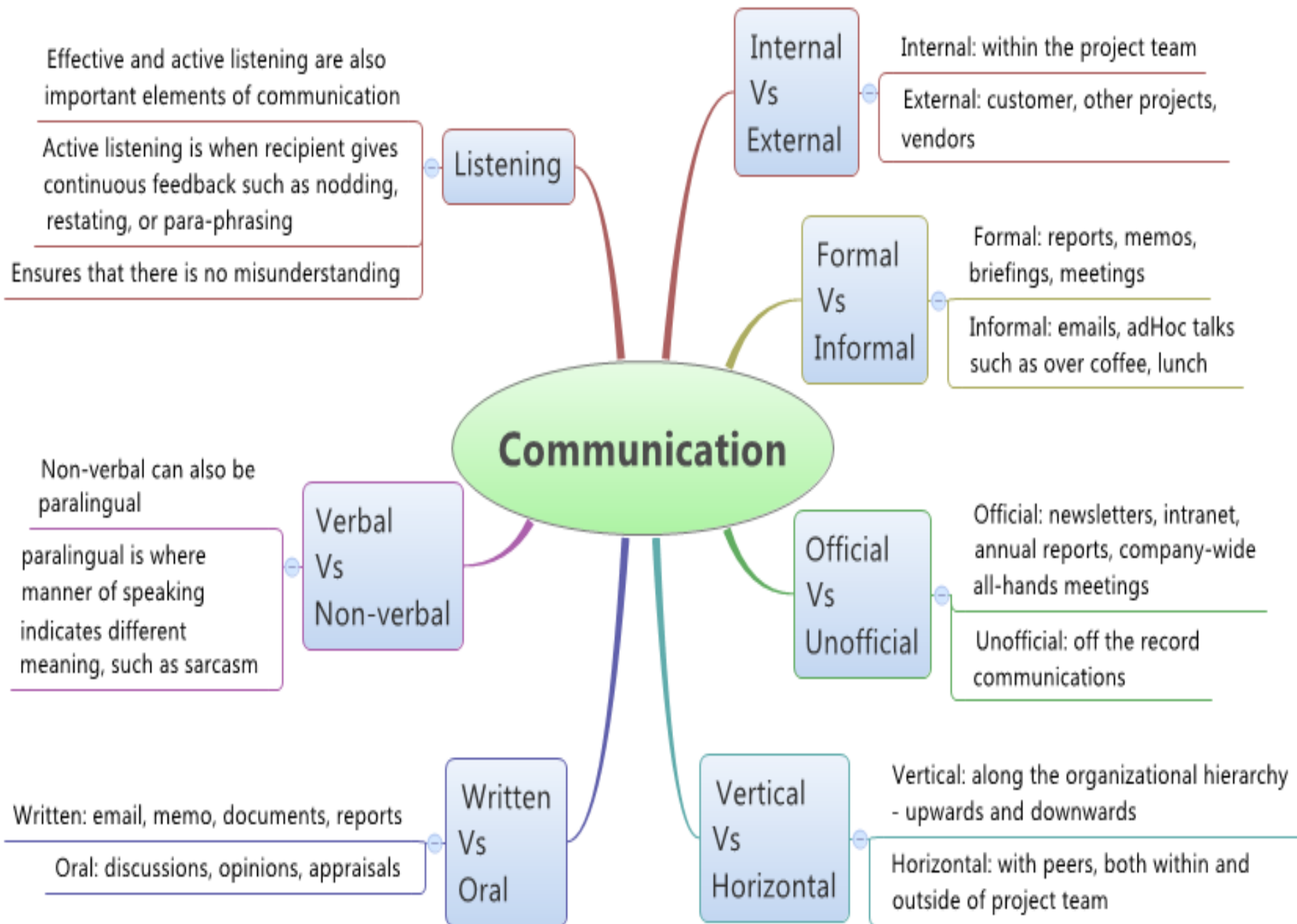
The way something is said, rather than what is actually said, is an important component of nonverbal communication. This includes voice quality, intonation, pitch, stress, emotion, tone, and style of speaking, and communicates approval, interest or the lack of it.

55% + 38%

Visual Communication

Visual communication is through visual aids such as signs, typography, drawing, graphic design, illustration, color and other electronic resources. Its supports written communication

Part of Verbal Comm.



The interpersonal and mass communication of health information to patients and the public is complicated.

“Health communication, health literacy, and health education can be more than the sum of their parts. By working together, we can progress farther and faster to improve individual and community health.”

-Allen et al., 2017

Improving Collaboration among Health Communication,
Health Education, and Health Literacy

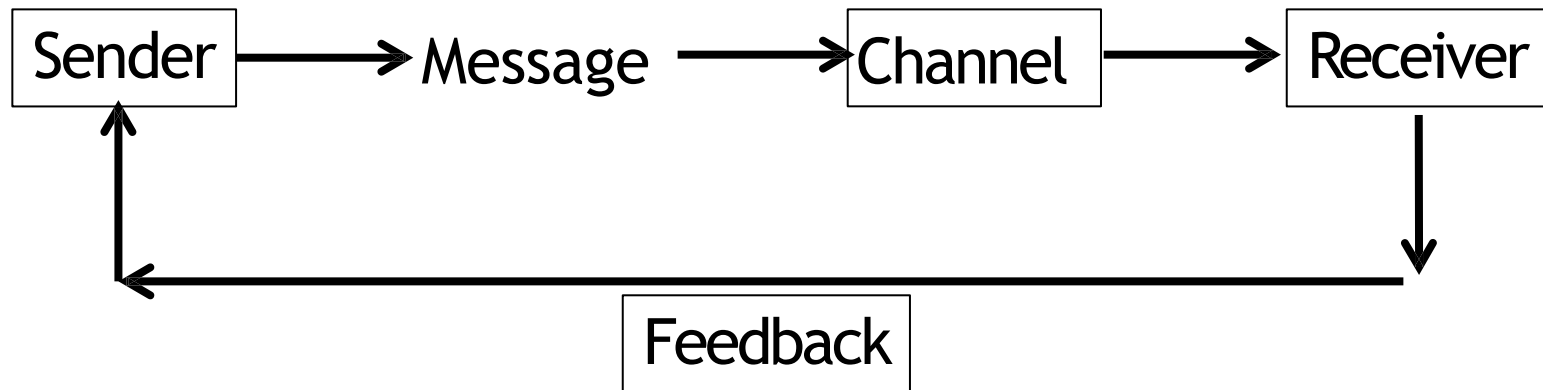
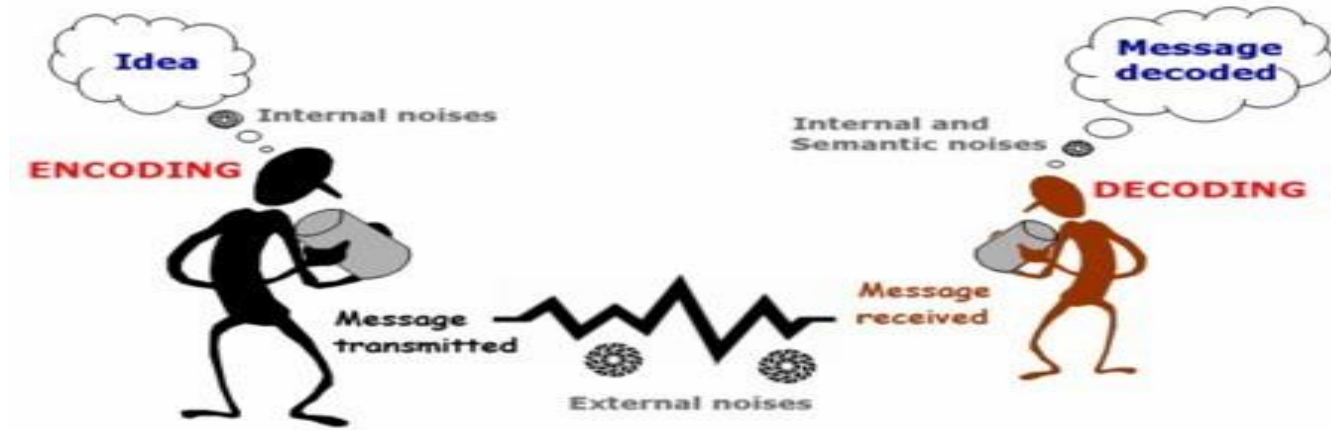
A National Academy of Medicine Discussion Paper



@theNAMedicine



nam.edu/Perspectives



Communication Process

Sender

- Must know:
 - Objectives
 - Audience: interests & needs
 - Message
 - Channels of communication
 - Professional abilities
 - Limitations

Receiver

- Single person or Group of people
- Controlled audience
- Uncontrolled audience

Message

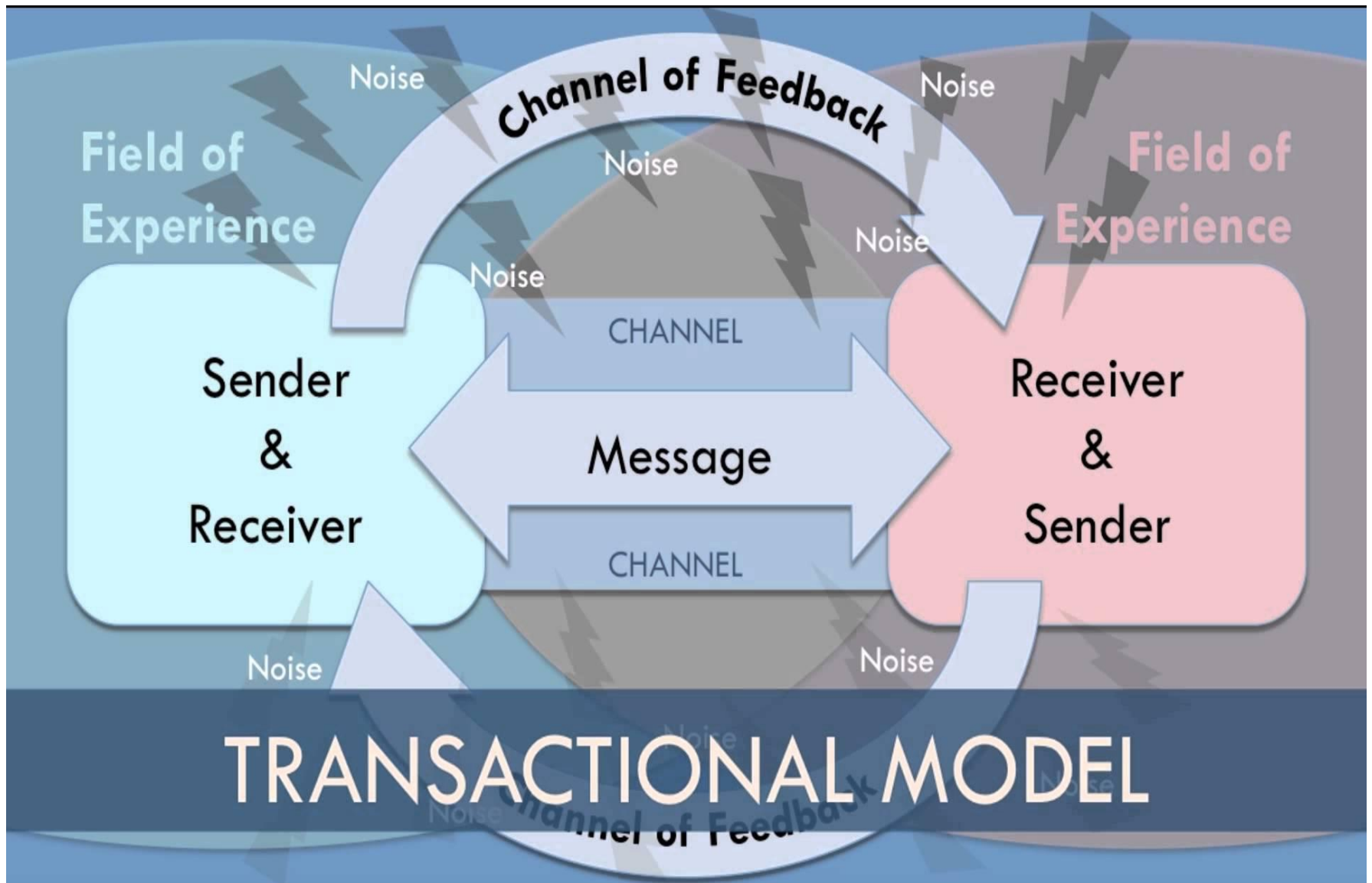
- Must be:
 - In line with the objective(s)
 - Meaningful
 - Based on felt needs
 - Clear and understandable
 - Specific and accurate
 - Timely and adequate
 - Fitting the audience
 - Culturally and socially acceptable

Channel

- Interpersonal communication
- Mass media
- Traditional or folk media

Communication models





communication process. So by incorporating all parts of communication process, a comprehensive communication model is presented below:

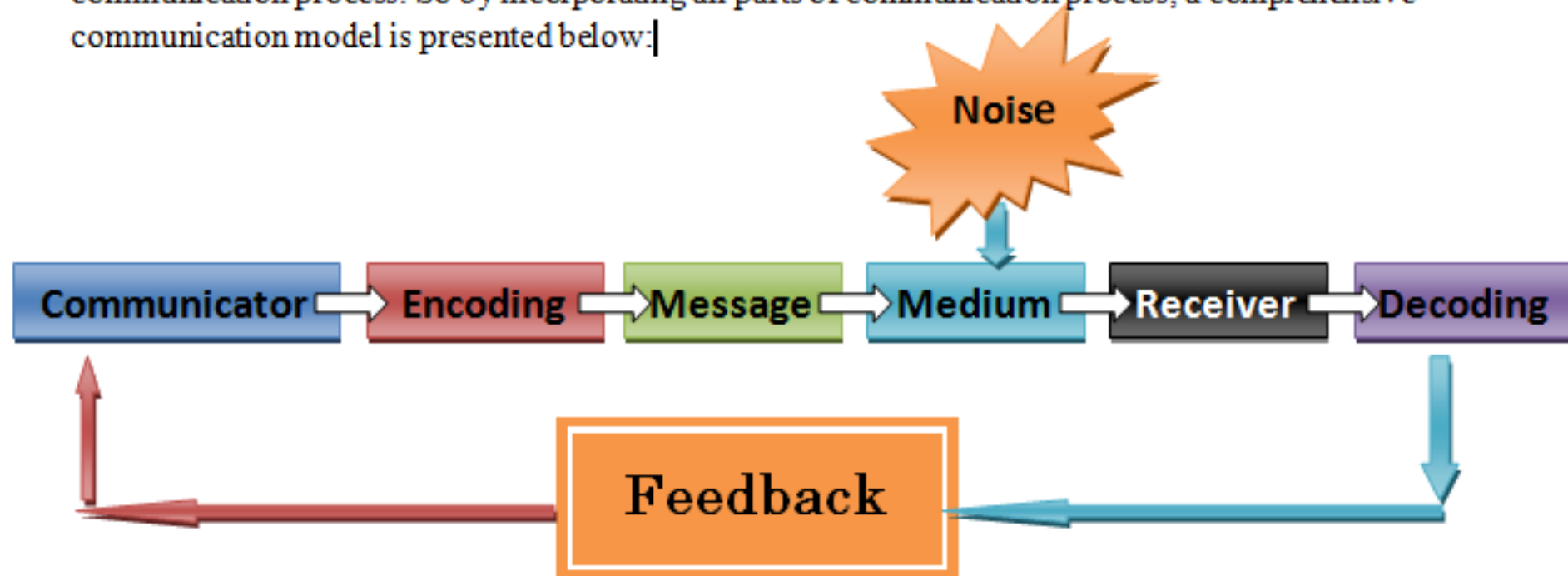


Fig: Comprehensive Model of Communication

The Five Communication Styles

1. The Assertive Style
2. The Aggressive Style
3. The Passive-Aggressive Style
4. The Submissive Style
5. The Manipulative Style

New seatbelt design:
45% less car accidents!!



**Those
Funny
Talks!**

The Assertive Style

Behavioural Characteristics

- Achieving goals without hurting others
- Protective of own rights and respectful of others' rights
- Socially and emotionally expressive
- Making your own choices and taking responsibility for them
- Asking directly for needs to be met, while accepting the possibility of rejection
- Accepting compliments

Language

- "Please would you turn the volume down? I am really struggling to concentrate on my studies."
- "I am so sorry, but I won't be able to help you with your project this afternoon, as I have a dentist appointment."

Non-Verbal Behaviour

- Voice – medium pitch and speed and volume
- Posture – open posture, symmetrical balance, tall, relaxed, no fidgeting
- Gestures – even, rounded, expansive
- Facial expression – good eye contact
- Spatial position – in control, respectful of others

People on the Receiving end Feel

- They can take the person at their word
- They know where they stand with the person
- The person can cope with justified criticism and accept compliments
- The person can look after themselves
- Respect for the person

<p>Behavioural Characteristics</p> <ul style="list-style-type: none"> •Frightening, threatening, loud, hostile •Willing to achieve goals at expense of others •Out to "win" •Demanding, abrasive •Belligerent •Explosive, unpredictable •Intimidating •Bullying 	<p>Non-Verbal Behaviour</p> <ul style="list-style-type: none"> •Voice – volume is loud •Posture – 'bigger than' others •Gestures - big, fast, sharp/jerky •Facial expression – scowl, frown, glare •Spatial position - Invade others' personal space, try to stand 'over' others
<p>Language</p> <ul style="list-style-type: none"> •"You are crazy!" •"Do it my way!" •"You make me sick!" •"That is just about enough out of you!" •Sarcasm, name-calling, threatening, blaming, insulting. <p>The Aggressive Style</p>	<p>People on the Receiving end Feel</p> <ul style="list-style-type: none"> •Defensive, aggressive (withdraw or fight back) •Uncooperative •Resentful/Vengeful •Humiliated/degraded •Hurt •Afraid •A loss of respect for the aggressive person •Mistakes and problems are not reported to an aggressive person in case they "blow up". Others are afraid of being railroaded,

The Passive-Aggressive Style

Behavioural Characteristics

- Indirectly aggressive
- Sarcastic
- Devious
- Unreliable
- Complaining
- Sulky
- Patronising
- Gossips
- Two-faced - Pleasant to people to their faces, but poisonous behind their backs (rumours, sabotage etc.) People do things to actively harm the other party e.g. they sabotage a machine by loosening a bolt or put too much salt in their food.

Non-Verbal Behaviour

- Voice – Often speaks with a sugary sweet voice.
- Posture – often asymmetrical – e.g. Standing with hand on hip, and hip thrust out (when being sarcastic or patronising)
- Gestures – Can be jerky, quick
- Facial expression – Often looks sweet and innocent
- Spatial position – often too close, even touching other as pretends to be warm and friendly

Language

- "Why don't you go ahead and do it; my ideas aren't very good anyway"
- "You always know better in any case."
- "Oh don't you worry about me, I can sort myself out – like I usually have to."

People on the Receiving end Feel

- Confused
- Angry
- Hurt
- Resentful

The Submissive Style

Behavioural Characteristics

- Apologetic (feel as if you are imposing when you ask for what you want)
- Avoiding any confrontation
- Finding difficulty in taking responsibility or decisions
- Yielding to someone else's preferences (and discounting own rights and needs)
- Opting out
- Feeling like a victim
- Blaming others for events
- Refusing compliments
- Inexpressive (of feelings and desires)

Language

- "Oh, it's nothing, really."
- "Oh, that's all right; I didn't want it anymore."
- "You choose; anything is fine."

Non-Verbal Behaviour

- Voice – Volume is soft
- Posture – make themselves as small as possible, head down
- Gestures – twist and fidget
- Facial expression – no eye contact
- Spatial position – make themselves smaller/lower than others
- Submissive behaviour is marked by a martyr-like attitude (victim mentality) and a refusal to try out initiatives, which might improve things.

People on the Receiving end Feel

- Exasperated
- Frustrated
- Guilty
- You don't know what you want (and so discount you)
- They can take advantage of you.
- Others resent the low energy surrounding the submissive person and eventually give up trying to help them because their efforts are subtly or overtly rejected.

The Manipulative Style

Behavioural Characteristics

- Cunning
- Controlling of others in an insidious way – for example, by sulking
- Asking indirectly for needs to be met
- Making others feel obliged or sorry for them.
- Uses 'artificial' tears¹⁸

Non-Verbal Behaviour

- Voice – patronising, envious, ingratiating, often high pitch
- Facial expression – Can put on the 'hang dog' expression


Language


- "You are so lucky to have those chocolates, I wish I had some. I can't afford such expensive chocolates."
- "I didn't have time to buy anything, so I had to wear this dress. I just hope I don't look too awful in it." ('Fishing' for a compliment).

People on the Receiving end Feel

- Guilty
- Frustrated
- Angry, irritated or annoyed
- Resentful
- Others feel they never know where they stand with a manipulative person and are annoyed at constantly having to try to work out what is going on.

BARRIERS TO EFFECTIVE COMMUNICATION

 different perception

 language differences

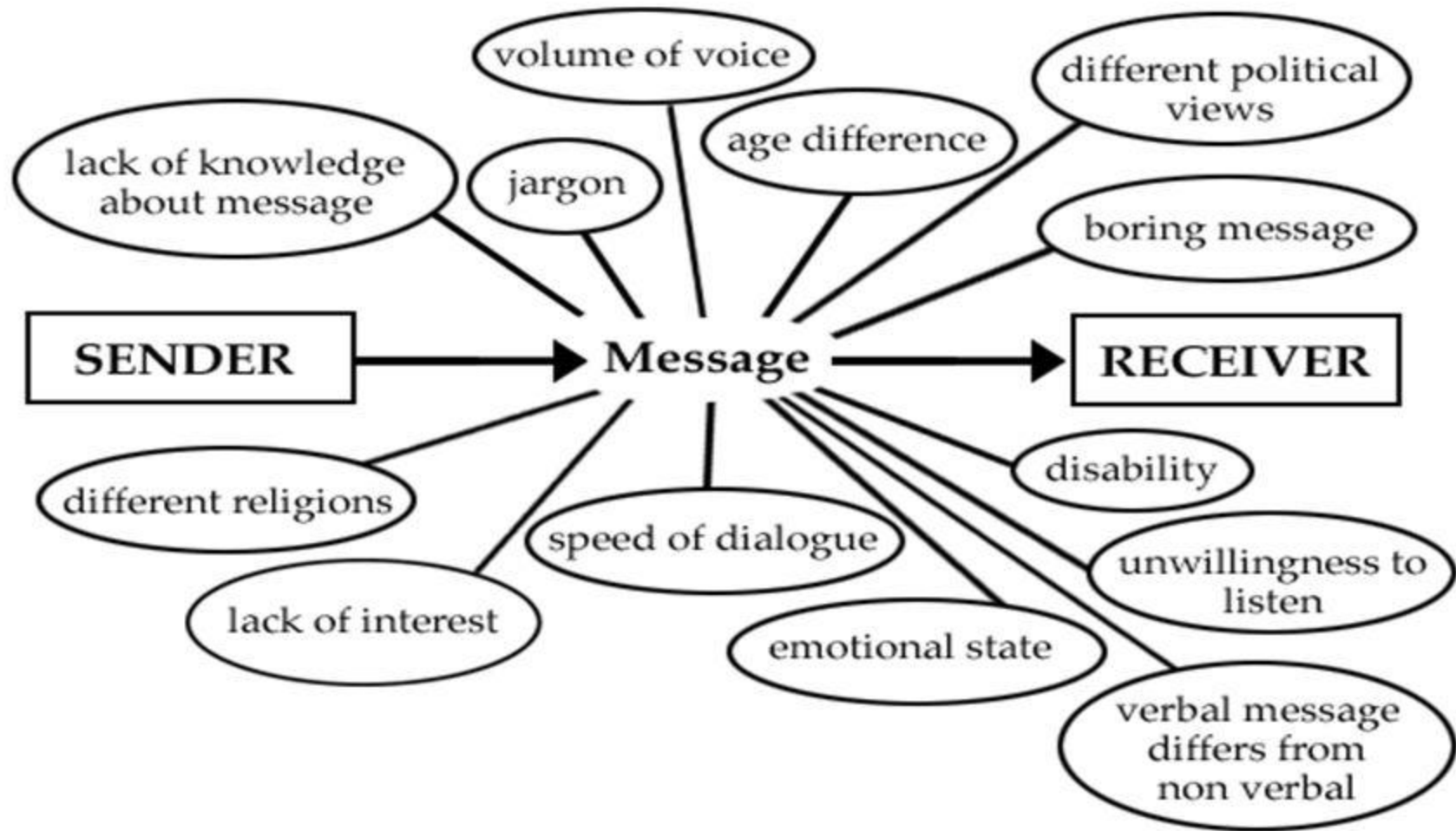
 cultural differences

 emotions

- Physiological barriers
- Psychological barriers
- Environmental barriers
- Cultural barriers



Barriers to communication



Effective Communication: Barriers and Strategies

Some basic skills can help you to be a more effective communicator in the classroom. This Teaching Tip explores:

1. barriers to listening
2. barriers to accurate perception
3. barriers to effective verbal communication

Barriers to listening

- **Focusing on a personal agenda.**
- **Experiencing information overload.**
- **Criticizing the speaker.**
- **Getting distracted by emotional noise.**
- **Getting distracted by external “noise”.**
- **Experiencing physical difficulty.**

What are the strategies?

Barriers to accurate perception

- **Stereotyping and generalizing.**
- **Not investing time.**
- **Having a distorted focus.**
- **Assuming similar interpretations.**
- **Experiencing incongruent cues.**

What are the strategies?

Barriers to effective verbal communication

- Lacking clarity.
- Using stereotypes and generalizations.
- Jumping to conclusions.
- Dysfunctional responses.
- Lacking confidence.

Why COMPLICATE Life ?

Missing somebody? Call

Wanna meet up?.....Invite

Wanna be understood?.....Explain

Have questions?.....Ask

Don't like something?.....Say it

Like something?.....State it

Want something?.....Ask for it

Love someone ?.....Tell it

Nobody will know what's going in your Mind.....

It's better to express rather than to Expect.....

You already have the NO, Take the risk of getting the YES

We just hav one life

Keep It Simple Silly...:D\=D/

What is Effective Communication?

- When a sender elicits an intended response from his/her receiver, communication is effective.
- When a sender elicits intended response repeatedly, he/she is not only an effective communicator but also a successful and influential communicator.

Feedback

- Flow of information from the audience to sender
- Opportunity to the sender to modify his message



"The doctor will see you now —
I can't promise that he'll talk
to you, but he'll see you."

Effective Communications CHECKLIST

WHAT?

- ✓ Is your message accurate and complete?
- ✓ Is your message clear and concise?
- ✓ Is your message well structured
- ✓ Is your message necessary?

HOW?

- ✓ Are you engaged in active listening (paraphrasing, summarizing the outcome of the exchange, asking questions)?
- ✓ Are you open minded, considering another perspective?
- ✓ Are you engaged, fully present, not withdrawn, **not multi-tasking**?
- ✓ Are you using the appropriate method of communication (face to face/email/phone/IM)
- ✓ Is your attitude positive? Are your body language and tone of voice positive?
- ✓ Are you assertive but **not aggressive**?
- ✓ Do you remember to **not make it personal**?

WHY?

- ✓ Are you clear on what are you trying to accomplish? 3 top reasons we communicate in the workplace are:
 - Exchanging information
 - Brainstorming, problem solving
 - Helping, relationship building, team building, damage prevention and control
- ✓ Do you have the end result in mind?

WHO?

- ✓ Are you communicating with the right person?
- ✓ Are you including all the right people?
- ✓ Are you including only the right people (not including irrelevant parties)?

WHEN?

- ✓ Is your communication timely (lack of delays)?
- ✓ Is it a good time for the party you are communicating with?
- ✓ Is the duration of the discussion/length of email tailored to the importance of the situation?

WHERE?

- ✓ Are you communicating in a place appropriate for the message and subject matter (security, privacy considerations)?



Methods in Health Communication

- Individual approach
- Group approach
- Mass approach
 - [Television](#)
 - Radio
 - Newspapers
 - Internet
 - Printed material
 - Direct mailing
 - Posters, billboards and signs
 - Health museums and exhibitions
 - Folk media

Importance of Health Communications

“Health communication can contribute to all aspects of disease prevention and control, health promotion, and medical...care.

“Communication is critical to the work of health professionals and their interactions with each other, their patients, and the information they create and use.”

Source: Communicating Health: Priorities and Strategies for Progress, Office of Disease Prevention and Health Promotion, DHHS, July 2003

What Communications *Can* Do

- Increase audience knowledge, awareness
- Influence perceptions, beliefs, attitudes
- Prompt action
- Demonstrate/illustrate healthy skills
- Reinforce knowledge, attitudes, behavior
- Show benefits of behavior change
- Advocate a position on an issue/policy
- Increase demand or support for services
- Refute myths, misconceptions
- Strengthen organizational relationships.

Questions?

