

AT A GLANCE

12 Steps for Developing a Health Communication Campaign



November 2018

Introduction



Figure 1. 12-step health communication process

Health communication is an essential element of health promotion activities. Through it, public health practitioners have the opportunity to affect change, from personal behaviours within the population to supportive environments in society.

To help practitioners plan health communication efforts, this guide offers a step-by-step approach.

Health communication is a dynamic process. Figure 1 portrays 12 proposed steps to follow when designing health communication campaigns. The steps are interrelated. You can progress through them in a non-linear manner as new issues, events or evidence emerge. Variables such as personnel, budget, and project resources will influence capacity and help determine how to use the steps.

At the core is Project Management. This serves as a starting point and directs efforts throughout the health communication process. The other 11 steps are divided into three main phases:

1. **Scoping** (Steps 2-5) focuses on building the body of evidence to inform every decision in the health communication cycle.
2. **Development** (Steps 6-9) aims to transform the insights and evidence from the scoping phase into tangible messages, products and action plans.
3. **Execution** (Steps 10-12) brings all the previous steps together at an operational level.

The success of health communication efforts hinge not only on the 12 steps, but also on engagement, risk management and evaluation activities. These activities, included on the outer rim of Figure 1, are present throughout all the steps. The 12-step process helps to ensure efforts are well-grounded and thorough, and will play a significant role in health promotion efforts.^{1,2}

This introductory resource offers a brief overview of each of the 12 steps of health communication, as well as [worksheets](#) to help document and track relevant considerations. For guidance in completing the worksheets, see the [samples](#) that follow an actual project that Ottawa Public Health undertook around helmet use.

[See All Worksheets](#)

[Sample Worksheets](#)

Step 1: Project Management



Purpose: develop a robust project management plan to effectively and seamlessly move through the health communication cycle.

Health communication project plans need to be comprehensive and consider a range of factors.

Begin with establishing a health promotion theoretical foundation to guide the efforts ([worksheet 1.1](#)). These typically come from academic literature with some primary health promotion examples being the Health Belief Model^{3,4} and the Risk Perception Attitude framework (RPA).⁵ To learn more about key health promotion theories please see [PHO's Health Promotion Foundations Course](#) (modules 3,5, and 6).

Next, define stakeholder roles and expectations ([worksheet 1.2](#)). Explore interest in the initiative, the preferred involvement level of stakeholders, their fit with individual mandates, and level of influence over the project.

Third, confirm a decision-making process (like consensus or majority vote) to move health communication efforts forward ([worksheet 1.3](#)).

Fourth, compile an inventory to assess available resources including human, financial, time, equipment, space and in-kind ([worksheet 1.4](#)). Such resource factors will all have implications on outputs, timelines and other decisions. Review and update often as new information or pressures on the project come to bear.

Fifth, determine timely, relevant and credible processes for data gathering and analyses ([worksheet 1.5](#)). This will help ensure evidence-informed decision-making (EIDM)⁶ throughout health communication efforts. To have clear and realistic expectations for data-gathering and analyses, consider time, budget, team expertise and accessibility to data.

Last, develop a timeline and work plan,⁷ taking into account funding submission deadlines, process evaluation activities (e.g., message focus-testing), engagement activities, and copy editing ([worksheet 1.6](#)). In addition, allow for as much time as possible to involve stakeholders. A variety of software packages and freely available templates can assist with formatting and presentation.

Revisit the plan throughout the initiative based on emerging evidence or new decision points. After each step, go back to the project management plan to ensure it remains aligned with the project goals.

[Step 1 Worksheets](#)

[Sample Worksheets](#)

Step 2: Assess Context

Purpose: examine the social, economic, political and environmental factors that can affect health issues or behaviours.

The data to gather, analyze, synthesize and discuss will inform decisions throughout the health communication cycle.

The first task is to determine what you know, and want and need to know, about the health topic. This will allow a focused data search, collection and analysis. Keep in mind the mandate, planning requirements and community/organization expectations. For example, it may be necessary to adhere to funding proposal guidelines or practice standards (e.g., [Ontario Public Health Standards](#)).⁸

In assessing context, concentrate on three areas of knowledge:⁷

1. what is the situation ([worksheet 2.1](#))?
2. what is making it better ([worksheet 2.2](#)) or worse ([worksheet 2.3](#))?
3. what possible solutions, interventions and actions can address the situation ([worksheet 2.4](#))?

Second, with a clear sense of what your team knows and needs to find out about the health topic, develop a well-defined and practical plan to gather the data. Prioritize research questions and identify the best individuals to collect data, using a combination of methods (from literature searches, to surveys, to existing data sets) and sources (e.g., researchers, online, government, hospitals, epidemiologists, etc.).

Third, gather the data and sort it around the three main areas of knowledge noted above. To ensure sound and critical analysis of available evidence, keep good records of data sources and carefully assess the validity of the evidence. For instance, a peer-reviewed article should carry more weight than an unpublished report.

Fourth, to make sense of the data, frame the insights as answers to the context analysis questions (situation, influences, solutions). In looking at the situation, focus on the most essential findings that will provide critical direction throughout the health communication cycle. Think about:

- the size and growth of the situation
- the burden and impact of the problem
- health inequities
- public perception of the problem
- stakeholder perceptions and concerns
- the potential consequences of acting now versus later

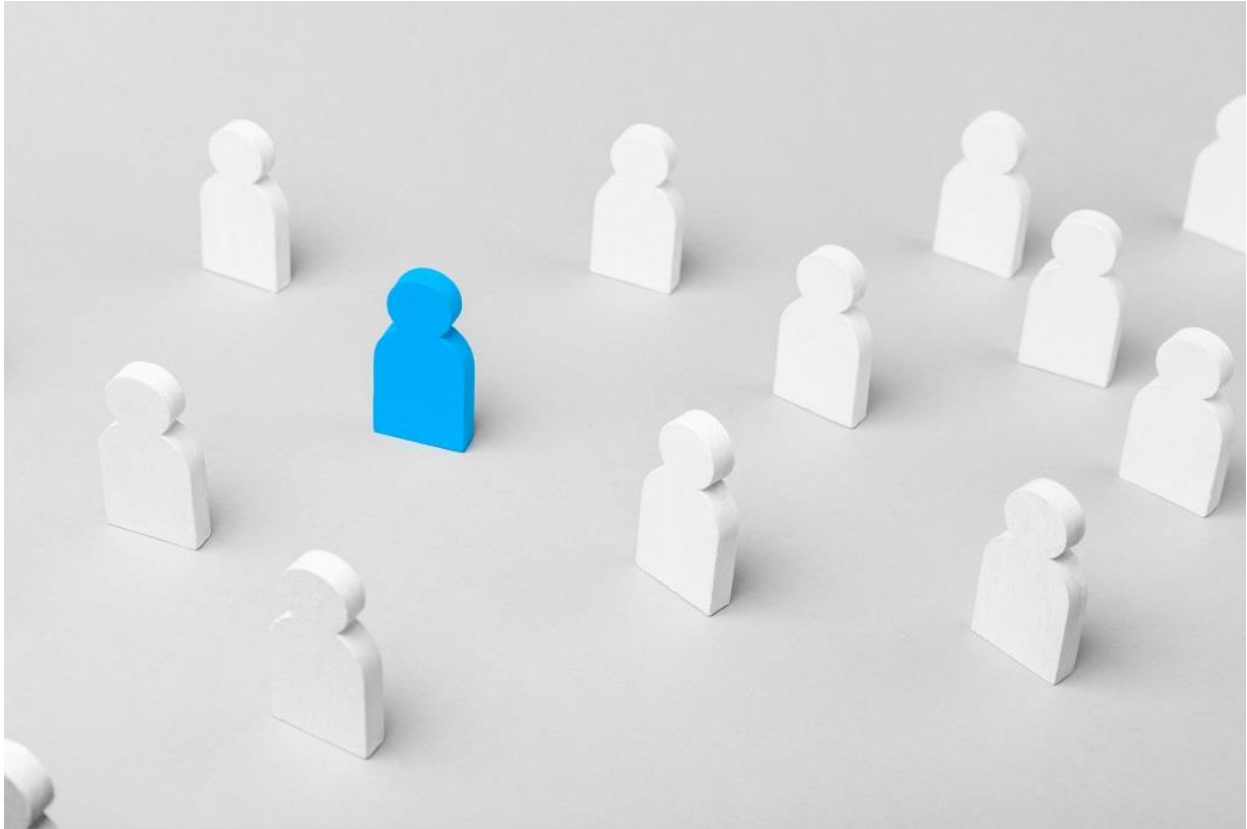
Consider these insights in decision-making throughout the health communication cycle. Insights can also pertain to gaps in the available evidence, to be considered in evaluation activities.

Fifth, evaluate your results and draft some recommendations. Consider the understanding about how to improve the situation, and how this balances with the available resources. Think about things such as how to integrate what has been learned into remaining planning decisions, and any gaps in data. Also think about how to maximize the effect of health communication efforts with available time, financial resources and mandate. Contemplate if health communication is still the best approach for this topic, and whether you continue to invest.

[Step 2 Worksheets](#)

[Sample Worksheets](#)

Step 3: Analyze Audience



Purpose: focus data collection on your intended audience, to better understand the traits, circumstances and influences affecting your message (e.g., its uptake, comprehension, acceptance and effectiveness).

In this step, you will explore four areas of knowledge about your audience. First, define demographics to get a broad yet clear preliminary definition of the intended target: gender; age; occupation; income range; education; family situation; location; and context (political, social, environmental). Within a given group there can be tremendous variability—dig deeper into other types of data.

Next, identify cultural characteristics, such as: language proficiency and preferences; religion; ethnicity; generational status; family structure; degree of acculturation (first, second or third generation); and lifestyle factors (e.g., diets, activities). Any of these can affect people's values, beliefs, attitudes and risk perception. Examining the community's cultural make-up is important in determining specific population groups, appropriate messaging strategies and the best communication channels and vehicles.

Third, assess behavioural traits which can include the audience's readiness for change, and their social systems. What are their peer influences? What are social norms?

Also, think about what the audience is being asked to undertake in changing behaviour. For instance, they may have to give up benefits from their unhealthy behaviours and invest energy in adopting and

maintaining a new healthier behaviour. A cost and benefit analysis will help to inform more persuasive and responsive messaging strategies.

For more insights into the audience's decisions, investigate where they go to for health information. Who do they listen to? Who do they trust?

Fourth, consider psychographics. While demographics describe the “what” of the audience, psychographics describe the “why”. Here are just some areas to explore when studying psychographics:

- values (the basis of our motivations and behaviours)
- beliefs (judgments about oneself and the surrounding environment or world)
- level of awareness and knowledge
- attitudes (a mix of feelings and tendencies)
- health literacy (the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions⁹)
- perceived susceptibility (how people appraise their chances of developing a health condition or being harmed by something).

Use [worksheets 3.1](#) and [3.2](#) to analyze the audience against these categories, from individual and network levels. With this knowledge about your broader audience, you can segment. Age, gender and education are not, on their own, reliable predictors of health behaviour change. Break down the audience into a smaller number of groups, as homogenous as possible, based on their common characteristics. Such segmentation will allow tailoring of messaging and approaches.¹⁰⁻¹⁴

[Step 3 Worksheets](#)

[Sample Worksheets](#)

Step 4: Choose Approach

Purpose: now that you have an overview of the situation (what), and have segmented your audience (who), you can map out your health communication approach (how).

Think of your health communication approach as the first level of a logic model. This step is crucial for setting up goals, objectives, strategies, activities and communication indicators/targets during the development phase. It will also provide direction for the execution phase.

First, choose the health communication approach ([worksheet 4.1](#)).^{1,2,15} Health communication literature presents many types of approaches, which are structured into four categories.

1. Mass media, e.g., any communication that exposes a large population to a set of messages. Several factors can hinder mass media effectiveness: the pervasive marketing of unhealthy products, opposing messaging or social norms. However, mass media can generate meaningful changes in health behaviours and increases by applying multiple approaches.^{14,16-18}
2. Community engagement and media advocacy.^{14,19,20} Unlike mass media, this focuses on the environmental context of public health issues and on the societal mechanisms to address them, such as policies and laws. Usually, the intended audiences are policy makers, politicians, or anyone who can influence the environmental factors that hinder or promote health.
3. Interpersonal communication. In the context of health promotion, this may include clinical education, peer-to-peer training, or one-on-one interactions (e.g., counselling, coaching).
4. Professional intermediaries communication, which aims to influence how health professionals interact and communicate with their patients or clients.

Aim for a blend of approaches to appeal to the full spectrum of the audience, and move them along the continuum of behavioural and social change. With a communication approach settled, populate a logic model to identify health communication efforts ([worksheet 4.2](#)).

Next, review the evidence. Determine which barriers and facilitators to focus on (force field analysis). What are the different factors that influence the health outcome of interest? Which audience and segments deserve focus? Once these elements are identified, discuss the types of health communication approaches that are logical and feasible.

Third, develop a timeline for your health communication efforts. Look at ways to pace and repeat certain messages, with different durations (i.e., some communication products will stay in the market for different periods). A well-defined timeline will help define your activities (Step 6), messages (Step 7) and dissemination strategy (Step 9). These efforts will help to maximize your community's window of opportunity or address competing voices in a timely manner.

[Step 4 Worksheets](#)

[Sample Worksheets](#)

Step 5: Establish Goals and Objectives



Purpose: establish the basis for designing health communication activities and products that will resonate with your audience, and selecting channels, vehicles, activities and indicators/targets (Step 6).

Involve stakeholders in this process—they will bring a variety of approaches to make the goal and objectives relevant and credible. Health communication is a living process; an event, one convincing voice or a political decision can influence decisions. Throughout the development and execution phases, there may be a need to revisit objectives.

Start by setting a goal, which is a general statement providing direction to all aspects of the development and execution phases.⁷ Goals are not specific or measurable and have no deadline. They are global statements of intent. To define a goal, think of a simple statement that captures the broad direction of a health communication effort. For instance: “Change the social norm so that the act of socially supplying tobacco to teens becomes less common and, ultimately, unacceptable.”

Next, define outcome objectives—clear statements of the desired change as a result of the health communication efforts ([worksheet 5.1](#)). Outcome objectives should be compatible with the goal, organizational mission, and vision or mandate, and be credible to key stakeholder groups. Outcome objectives have four components:

1. **Who** you want to change—audience or a specific segment of your audience.
2. **What** you want to change—this choice should be strategic, relevant, feasible and within your mandate. The health promotion theory or theories chosen in Step 1 can provide guidance on which factors significantly have an impact on the situation.

3. **Direction of change** or by **how much** you want to change—consider data from the context assessment and audience analysis steps.
4. **When** you want to see change—set a timeline for reaching the objective.

Outcome objectives can be divided into short-, medium- and long-term. Breaking down objectives provides a series of milestones as your audiences moves forward on the behaviour change continuum. Usually, short-term objectives are two months to one year, medium-term objectives are one to five years, while long-term objectives are over five years.⁷

To define well-crafted and credible program objectives, remember the acronym SMART:

- Specific (clear and precise)
- Measurable (amenable to evaluation, information needed to assess objective readily available and accessible)
- Appropriate (aligned with mandates and stakeholder expectations, theory and other evidence)
- Realistic (reasonable considering the resources and other circumstances)
- Time-limited

At the end of this step, continue to populate your logic model ([worksheet 5.2](#)).

[Step 5 Worksheets](#)

[Sample Worksheets](#)

Step 6: Identify Settings and Activities

Purpose: choose the best ways to carry out your messages.

First, choose the right channels and vehicles ([worksheet 6.1](#)). Each strategic direction has its own set. A channel is the platform for sending the message (like the Internet), and a vehicle is the specific form (like a website, blog or tailored e-mail).¹ Some other choices include direct mail; magazines, and newspapers; displays; brochures; posters; information lines; point-of-purchase material; promotional items; radio and television; events; training courses; school lessons; speeches; presentations; coaching; etc.

To maximize outreach, choose a few channels and vehicles. For instance, a community-wide health communication campaign can launch with an event, with a website and various social media platforms to keep the issue in the spotlight.

Consider the intended audience and segments (where and how do they get information?); the information to get across (how complex and what is needed to motivate?); the objectives (do you need to engage the audience, get data, measure outcomes?); and the expertise and resources to invest. Gather a sample of the audience, segments and partners for a focus group. Probing these stakeholders will ensure a more judicious choice of channels, vehicles and activities.

Second, select evidence-informed and result-oriented activities ([worksheet 6.2](#)). Link them back to relevant services that your organization or community partners offer. Activities do not have to be a one-time event. Think of ways to combine or sequence activities across the timeline. For example, mix the shelf life of activities (e.g., run a short news story and develop posters), tie communication activities to the season, or build in other existing events like theme weeks or national conferences.

In launching health communication activities, monitor all social media platforms to assess your presence (digital and traditional media) and which types of messages, visuals and/or vehicles are getting the most traction. Based on the data, review timelines, activities or choice of vehicles.

Third, define health communication targets ([worksheet 6.3](#)). Look back at the outcomes discussed in Step 5, around who and what you want to change, by how much, and when. Health communication targets are clear and measurable indicators of desired change. For each communication target, consider these three questions:

1. Is it reliable? Do the indicators give consistent, accurate measurement over time?
2. Is it valid? Does the indicator measure what you want?
3. Is it accessible? How easy is it to get the information you need to measure?

Continue to populate your logic model with selected outcomes and targets ([worksheet 6.4](#)).

[Step 6 Worksheets](#)

[Sample Worksheets](#)

Step 7: Develop Messages

Purpose: determine what to say to your intended audience and how you will say it.

Truly persuasive health communication messages are difficult to create; when seeking a behavioural shift, the challenge is even greater. Focus on the elements, impression and design.

Start with the elements to develop content ([worksheet 7.1](#)). Strong and effective health messages have three elements:

- **What—the actual health message.** Make the message clear to the audience. It should be easy for them to point out the public health issue at hand, and understand what they have to gain by following a course of action (e.g., “healthy eating will increase your energy”) or what they have to lose (e.g., “if you drive under the influence of alcohol you can lose your licence”). To help determine an approach, get a handle on the degree of the audience’s knowledge of the issue, their risk tolerance, and how they process information.
- **So what—why should the audience care about what they are being told?** To motivate the audience, messages must be realistic, use clear evidence for threats or benefits, and ensure the messenger is seen as a credible source.
- **Now what—the call to action, i.e., what you want your audience to do.** It should be easy for them to point out the actions they are being asked to take, without opposing other health promotion activities or messages.

Next, think of impression. A message can take on any tone. The impression depends on the intended audience. Are audiences already interested in the topic? If so, rational appeals might work; if not, emotional appeals tend to work better.¹⁵ Consider the views and potential reactions of anyone who might be exposed. Many demographic, cultural, psychographic and behavioural factors influence message reception. Explore how the message can be taken and revise as needed.

Third, consider the design. Capturing and maintaining the audience’s attention throughout the message is vital to achieving the project’s objectives. The more you can engage audience members to actually think about the message, the more likely they are to experience appropriate changes in knowledge, attitudes, and behaviour.^{21,22} To attract attention, use high-quality design (text, graphics, visuals). Position the information that is most critical early in the message.

Review the information on the audience that was gathered during the scoping phase. Establish whether to adapt the message’s content in terms of language level, cultural characteristics, accessibility, literacy and equity. It is important to ensure that the message will reach, resonate and prompt every member of the intended audience.

[Step 7 Worksheet](#)

[Sample Worksheets](#)

Step 8: Develop Identity



Purpose: craft the look and feel of your communication effort, which can add to your credibility and relevance.

An identity can offer compelling benefits, such as: improving recognition; creating trust over time; supporting message repetition; building value; inspiring the audience; and generating an interest in a given issue or behaviour change.

First, define your identity ([worksheet 8.1](#)). In the context of health communication, an identity can reinforce associations between key messages and intended health outcomes, and encourage identification with healthy lifestyles.^{23,24} A health communication identity includes a name, a positioning statement or copy platform, a logo, a slogan, and possibly other images. It should distinguish, motivate and enable healthy behaviour changes or decisions. Strong identity can ignite attitudes and beliefs, repeat a message and serve as prompts for behaviours.

A health communication identity can also be a tool or strategy to effectively enhance health messages. It can amplify the impact of a communication campaign's efforts by:

- helping people remember key health messages
- stimulating conversation and comment (particularly important for behaviour change)
- leading people to recall key health messages every time they perceive the look and feel

When putting forward substantial health communication efforts, consider an identity that derives from the organization's own branding. When these efforts bring together more than one major partner, think about investing in developing a logo, slogan, look and feel specific to the campaign.

Once the identity is defined; develop it. Explore how corporations that target the same audience try to capture their attention. Consider these key questions.

- What do you want people to think about your organization, cause, issues and services in terms of styles and attitude?
- How do you want people to feel?
- What distinguishes your initiative from others to make it particularly effective?
- How does this initiative complement or build upon others?

After defining the identity, produce materials that can "carry" it (name, position statement, logo and images) and compete effectively with other behaviour-oriented messages.

[Step 8 Worksheet](#)

[Sample Worksheets](#)

Step 9: Plan Dissemination

Purpose: use various strategies to spread your messages across different settings, audiences, geographical locations and social networks.

Dissemination is the strategic distribution of products or messages to an intended audience, in order to spread knowledge, advocate for a specific issue or promote behaviour change.²⁵

A sound dissemination plan allows you to maximize your resources, leverage existing and new partnerships, pace efforts and expand reach.

First, plan to reach the audience. Combining dissemination strategies (concurrently or in sequence) can further improve the message's reach, motivate the audience to accept new information, and enhance their skills to apply it.²⁶

Evidence highlights the importance of identifying key social networks, trusted and credible sources, and opinion leaders to inform the dissemination plan.²⁷⁻³⁰ [Worksheets 9.1](#) and [9.2](#) can help you explore strategic considerations for creating a dissemination plan and finalizing a dissemination schedule.

Second, manage dissemination efforts in order to seamlessly execute a campaign or strategy. Dissemination can include content management for online social engagement, which for many organizations is a new practice. Some issues to consider:

- determine designated experts for the topic, content writers, graphic designers
- design schedules for the creation and delivery of organization-generated content
- develop an inventory of social media messages
- gather an inventory of sources for feeds and third-party content
- establish a monitoring schedule and back-up or risk mitigation plan
- develop approval protocol
- create an emergency protocol for critical community events
- manage the preservation of information (archiving files)
- provide guidance with governance policy documents

One key to effective dissemination online is encouraging social sharing of the content on various platforms ([worksheet 9.3](#)). To increase the likelihood of partners or the audience sharing the content:

- Make social media products embeddable.
- Make posts or content easy to share online, e.g., include social sharing buttons on the page containing your products or content.
- Create a video teaser for social platforms. Presentation software can convert a document to video with voiceover or background music. PowerPoint also has a convert-to-video feature, with voiceover for animated presentations.
- Conduct manual outreach to thought leaders, e.g., partners and bloggers that could be interested in disseminating the messages. Invite partners with popular social media accounts to share and promote your products.

[Step 9 Worksheets](#)

[Sample Worksheets](#)

Step 10: Production



Purpose: manage the design and production processes, to ensure the quality and relevance of your communication products and social media platforms.

First, review the decisions made and project management plan developed in Step 1, and adapt as necessary.

Second, select communication products based on the insights and recommendations from the scoping and development phases (more specifically [worksheet 7.1](#)). Consider mixing different types of products to maximize reach. Prepare a creative brief for each communication product, to guide the content development, format design and choice of visuals. Ensure the product's content complies with the accessibility legislation in your jurisdiction. In Ontario, that's the [Accessibility for Ontarians with Disabilities Act](#), which aims to identify, remove, and prevent barriers for people with disabilities.³¹

Third, test, review and approve communication products. Consider pre-testing with your intended audience and general population to ensure products are appropriate for distribution. After compiling pre-testing data, discuss the results with the team and modify the communication products accordingly. It may be useful to have another round of testing before launching the materials. Finalize materials with the designers or suppliers based on emerging results. Circulate and manage reviews and sign-offs according to the agreed upon approval process.

Fourth, generate final products. Among the key production management considerations:

- Who will be responsible for developing the drafts for each desired product?
- What is the budget available for printing/graphic design?

- If necessary, who is responsible for selecting, contracting and liaising with printers/creative firms?
- Who is responsible for developing the creative brief?
- Who is responsible for translation, if necessary?
- Who is responsible for the quality assurance and final approval of the products prior to printing/launching?

To track all these activities, develop a production schedule ([worksheet 10.1](#)).

[Step 10 Worksheet](#)

[Sample Worksheets](#)

Step 11: Implement Activities

Purpose: ensure that as you launch your health communication activities they unfold seamlessly.

First, to execute and manage implementation, identify a lead that will ensure the fulfillment of key responsibilities and milestones. The main roles include:

- identify issues and manage the team's effort to address them
- ensure that policies and procedures are observed
- enable open and fluid communication between team members and stakeholders
- provide timely updates to team and stakeholders
- ensure deployment of content management strategy elements
- manage vendor and contractor issues
- track and manage financial resources

Second, monitor and adapt as needed. Consider assigning monitoring responsibilities to more than just one person, as they can be time-consuming:

- document the launch and progress of activities
- document audience interactions, comments and social sharing activities
- address comments and feedback to maintain the integrity of the health communication efforts and messages
- assess and report on the performance of activities to the team
- alert the team of emerging issues and feedback that may change your activities or plans
- make adjustments, as directed by the planning team

After revisions, update other related decisions or products, including the dissemination plan, content management strategy, production schedules, policies, messaging strategies, resources allocations, and evaluation activities.

Step 12: Analyze and Report



Purpose: gather the evaluation results, to draw conclusions and formulate insights and recommendations for future health communication efforts.

Reporting on the reach and impact of your efforts allows you to connect with other partners and allies to enhance health communication knowledge and practice.

The first task is to identify the key findings and messages that will convey the complete story of health communication efforts. To interpret evaluation data, consider what the results mean in relation to the broader picture. After reviewing the results, identify which quantitative and qualitative data to communicate. To formulate practical recommendations, make them realistic, unbiased and derived from your evaluation results.³²

Second, tailor reporting for different audiences. A variety of stakeholders will find value in this reporting. Each will have different information needs.³³ For example, a manager will seek evaluation results to inform decisions on funding and accountability, while an external stakeholder may wish to gain insights on design and implementation. Get a sense of who can benefit from the evaluation and how they will use the information.

Involve stakeholders from the beginning. They can provide insights on how evaluation findings can be used, other potential stakeholders to include and dissemination tactics. In addition, stakeholders can assist in interpreting data, assess results, formulate effective recommendations and bring new perspectives to findings.

Third, establish reporting goals and objectives. There are usually three goals around communicating evaluation findings:³⁴

1. build awareness (e.g., insights on process, reach and impact)
2. enhance practice (e.g., improve quality and effectiveness of health communication efforts)
3. demonstrate accountability (e.g., provide funders, board members or management with valuable insights to support communication efforts and/or partnerships)

Last, determine and execute the reporting methods. Different vehicles can be effective in encouraging action and allow for tailoring of content for results:

- **Written**—detailed evaluation report, executive summaries, bulletins, articles, etc.
- **Verbal**—conference presentations, town-hall speeches, debriefs, informal meetings, etc.
- **Electronic**—infographics, e-bulletins, social media posts/tweets, podcasts, etc.

Regardless of the choice of vehicles, aim to include a mix of qualitative and quantitative data. Use quotes or case studies for key qualitative data, and tables or visuals for quantitative data.

A combination of strategies to communicate health communication results will increase the likelihood that findings and messages will reach the intended audience, in a way that will facilitate understanding and promote use.³⁵

Conclusion

Health communication is an essential element of health promotion. Public health practitioners have the opportunity to assist populations throughout the process of behaviour change and developing healthy public policies and supportive environments.

In health communication, the planning cycle—scoping, development and execution—can vary in its breadth, purpose and impact. As organizations move through the 12-step Health Communication Planning Process, they can deploy evidence-informed communication strategies and campaigns.

The guidance, worksheets and links in this document combine to offer valuable resources to help practitioners mount effective communication efforts. Such efforts can lead to significant contributions to public health outcomes.

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At a Glance

An *At a Glance* is a brief document offering an overview of a topic or steps in a process, in a concise manner.

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