Health Promotion Foundations - Module Seven

1. Health Promotion Foundations - Module Seven

1.1 Health Promotion Foundations - Module Seven

Notes:

In this module we will begin introducing health promotion strategies. Specifically, we will discuss health communication and health education. The discussion of health promotion strategies will continue in modules eight and nine.
1.2 Terms of Use

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Notes:

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1.3 Navigation Menu

Notes:

Throughout this module, you will see these icons. To be reminded of what they mean, please refer to the help tab at any point during the module.
1.4 Navigation Menu

**Glossary**
The glossary tab provides definitions of key words highlighted in this component.

**Help**
The help tab reviews the function of each icon.

**Menu**
The menu tab outlines each section in the module. By clicking on a menu title, you can navigate to that section.

**Resources**
The resources tab contains further reading, and a complete list of references.

**Transcript**
The transcript tab provides a full transcript for each slide.

**Notes:**

In the upper right hand corner of the slide, you will see a selection of ‘tabs’.

The glossary tab contains definitions of key words used in this module.

The help tab reviews the function of each icon.

The menu tab provides a list of all the sections in the module and allows you navigate to any one of them.

The resources tab contains further reading options, and a complete list of references for this module.

The transcript tab contains a full transcript of each slide.
1.5 Learning Objectives

Notes:

By the end of this module, you will be able to:
1. Explain, compare and contrast health communication and health education
2. Apply the strategies of health communication and health education to promote health
2. Health Communication

2.1 What is Strategy?

Notes:

It will be useful to start with a definition of ‘strategy’.

1) The Oxford English dictionary defines strategy as “a plan of action to achieve a long-term goal or aim.” (66)

2) The Merriam Webster dictionary defines strategy as "a skill for making or carrying out plans to achieve a goal." (67)

Health promoters use multiple strategies focused on individuals, families, groups, communities and populations to enhance health.
2.2 Ottawa Charter Action Areas

Notes:

The Ottawa Charter, introduced in Module 1, recognizes that action in five different areas is needed to promote health. The health promotion strategies we will discuss can be used to target these action areas.

A truly comprehensive health promotion intervention builds healthy public policy, creates supportive environments, strengthens community action, develops personal skills and re-orients health services. (1)
2.3 Health Promotion Strategies-Part One

Notes:

Let’s begin with the first health promotion strategy: Health communication.
2.4 What is Health Communication

Health communication is “the process of promoting health by disseminating messages through mass media, interpersonal channels and events.” (68) The U.S. Centers for Disease Control note that health communication is about persuading and educating an individual to make some sort of change to improve health. (69) This definition can also be extended to organizations, communities, and policy decision makers. This is often done through a staged process of raising awareness, changing attitudes, imparting knowledge and building capacity. (68)

This may include diverse activities such as clinician-patient interactions, classes, self-help groups, social media campaigns, telephone hotlines, mass media campaigns, and special events. Efforts can be directed towards individuals, social networks, small groups, organizations, communities or entire nations. (70)
2.5 What is Health Communication?

Notes:

When using health communication, it is important to consider who is involved in the communication process and how the message is being delivered. Channels and vehicles refer to the methods by which information is shared, or ‘how’ information is shared. Channels are the means by which a health communication message is sent. It can be direct - for example a discussion between a teacher and student, or indirect-say, through mediated lines such as the Internet. Vehicles are the specific formats used to deliver messages within a given channel - for example a newspaper article is a specific vehicle within the channel of a newspaper. (70)

Receiver refers to the intended audience of the message. It important to remember that communication is a dynamic process by which sources of information and receivers of information continuously interact. For this reason, one of the central tenets of health communication interventions is the need to conduct extensive formative evaluation including audience analysis, situational assessment and message pre-testing. In other words, it is critical to understand ‘who’ is the recipient of the information. (71)
2.6 Types of Health Communication

Notes:

There are different ways of carrying out health communication. Click each title to see a description and example.

Persuasive or behavioural communication techniques encourage specific audiences to change their behaviour.
A classic example is print material encouraging individual behaviour change about dietary habits such as eating more fruits and vegetables each day.

Risk communication is “any exchange of information concerning the existence, nature, form, severity or acceptability of health or environmental risks.” It is about providing the public with information about a health risk so that they can make an informed decision. (72)

An example of risk communication is the World Health Organization’s Handbook on Indoor Radon: A public health perspective. The report consolidates the latest information on the health risks of indoor radon, a toxic gas strongly associated with lung cancer and is freely available to the public. The information provided in the report can be used by the public to inform their decisions and practices regarding this health risk. (73)
Media advocacy is “the strategic use of mass media to advance a social or public policy initiative…the ultimate goal of media advocacy is to create changes in policies that improve health chances for communities.” (74) Media advocacy can also redefine or frame the issue as a public health issue to make it important, attract attention and increase awareness while also offering a solution. (75,76)

An example of media advocacy is the “Put food in the budget’ campaign.” The campaign began in 2009 as a response to the Ontario Government’s decision to exclude an increase in social assistance for Ontario adults. The main demand of the campaign is that the provincial social assistance program be amended to a rate that ensures health and dignity for those who rely on it. At its current rate many of those on social assistance only have $3.67 for food each day of the month when other necessary expenses are factored in. (77)

“Put food in the budget” uses media advocacy to advance its agenda. The campaign has successfully garnered the support of CBC radio, The Toronto Star, Toronto Metro News and many others to report on its cause. (78)

Entertainment education “is the process of carefully targeting an audience with entertaining stories that feature educational health information in order to promote various health outcomes.” (79)

An example of entertainment education is “Syke.” Syke is an anti-tobacco social branding campaign that targets youth who identify with alternative rock music, between the ages of 13-18. The campaign informs them about the harms of smoking and promotes a smoke-free music scene. The campaign uses rock concert sponsorship, marketing, social media, and brand ambassadors to associate tobacco-free lifestyles with alternative rock. Ultimately, music entertainment is used as a way to promote the benefits of a smoking free lifestyle. (80)

Interactive health communication involves an element of skill building, motivation, or social support to encourage behaviour change or maintenance.

It is usually a web-based application that combines health information and some form of social, decision or behaviour support. (81)

A good example is EatRight Ontario. It uses Facebook to provide an interactive health communication experience where people trying to improve their diets can
share their personal progress, helpful information and provide social support via the application. (82)

**Persuasive (Slide Layer)**

**Persuasive or behavioural communication:**
encourage specific audiences to change their behaviour.

**Example:**
A classic example is print material encouraging individual behaviour change about dietary habits such as eating more fruits and vegetables each day.
Risk (Slide Layer)

Risk communication:
“any exchange of information concerning the existence, nature, form, severity or acceptability of health or environmental risks.”

Example:
World Health Organization Handbook on Indoor Radon

Media (Slide Layer)

Media advocacy
“the strategic use of mass media to advance a social or public policy initiative...the ultimate goal of media advocacy is to create changes in policies that improve health chances for communities.”

Example:
‘Put food in the budget campaign’

“Give people on assistance back their dignity!”
We asked people what Premier Kathleen Wynne should do in response to the poverty in their communities...
Entertainment (Slide Layer)

**Entertainment education**

The process of carefully targeting an audience with entertaining stories that feature educational health information in order to promote various health outcomes.

**Example:**

“Syke”

Interactive (Slide Layer)

**Interactive health communication**

Involves an element of decision support or social support to encourage behaviour change or maintenance.

**Example:**

EatRight Ontario
2.7 Quiz Question

(Matching Drag-and-Drop, 10 points, 2 attempts permitted)

<table>
<thead>
<tr>
<th>Health communication method</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Persuasive or behavioural communication</td>
<td>Pamphlet in a seniors home about excessive dietary sodium intake</td>
</tr>
<tr>
<td>Media advocacy</td>
<td>Grassroots health equity campaign given local radio time to promote its agenda</td>
</tr>
<tr>
<td>Interactive health communication</td>
<td>Instagram page about the benefits of daily physical activity</td>
</tr>
<tr>
<td>Risk communication</td>
<td>Article on the risks of second hand smoke</td>
</tr>
<tr>
<td>Education entertainment</td>
<td>YouTube video targeted at youth to promote safe alcohol consumption</td>
</tr>
</tbody>
</table>

**Feedback when correct:**
That’s right! You selected the correct response.

**Feedback when incorrect:**

You did not select the correct response.

**Notes:**

Let’s test our knowledge so far on what we’ve learned--match the example to the most appropriate health communication strategy.

**Correct (Slide Layer)**
### Quiz Question

**Incorrect: Here is the correct response**

<table>
<thead>
<tr>
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</tr>
</tbody>
</table>

**Try Again (Slide Layer)**

**Incorrect: Please try again!**

[button] Try Again
2.8 When to use Health Communication?

Notes:

Now that we are able to explain health communication let’s look at when to use it.

As discussed in previous modules, the ecological framework describes five levels that impact an individual’s health behaviour. (37) It emphasizes that health behaviour change involves exploring the complex interactions between people, groups, and their environments. (39)

Health communication can be used to support change at all levels of the framework. For example, it may encourage individual behaviour changes as well as new supportive social environments. Health communication can also support the development of healthier organizational procedures and attitude changes among elected officials who set the policy agenda for a community.
2.9 Limitations of Health Communication

- May inadvertently create or exacerbate health inequities
- Minimal impacts in isolation of other strategies

Notes:

Despite its versatility, health communication is not a cure-all.
In some cases, health communication may inadvertently exacerbate health inequities. This phenomenon, known as the 'knowledge-gap hypothesis' was identified by researchers in the early 1970’s. (83) They observed that people with higher levels of education and income were able to act on health communication messages, whereas marginalized groups lacked the social and material resources to do so.

Although health communication has been proven effective at raising awareness and increasing knowledge, it may not have a significant impact without other strategies such as healthy public policies which provide people with the support required to make healthy changes. Health communication campaigns need to be part of a broader social marketing strategy or comprehensive approach to health promotion.

2.10 Health Promotion Strategies

All health promotion strategies involve the application of communication techniques.
Although we identify health communication as a separate strategy in this module, all health promotion strategies involve the application of communication techniques. Most people recognize the use of health communication techniques to persuade individuals to change behaviour. However, health communication can be used in a variety of ways. For example, to raise awareness about the need for change in an organization, to convince politicians about the need for healthy public policy, or to improve the ability of a community coalition to communicate with members and the broader community about their shared health concerns.

Resources (Slide Layer)

All health promotion strategies involve the application of

**Resources:**

- Making Health Communication Programs Work
- CDC’s Social Marketing Edition of CDCynergy
- Twelve steps to developing a health communication campaign

Click the links above to access the resources.

*To access the full text version of this resource, you may need to sign in with your organization’s credentials. Public Health Units and many other research organizations have access to library services that may assist with such requests. Contact your organization for more information.*
2.11 Components of Health Communication

Notes:

To use health communication effectively it is important to consider 3 main components: audience analysis, setting objectives, and message development.

The health promotion theories discussed in modules 4, 5, and 6 can help direct health communication activity. They can help you understand the reasons why an audience engages in an unhealthy behaviour and what may encourage them to change. They can also help you understand how far along an audience is on the continuum of change and what may help them advance. Theory may provide ideas about small, realistic objectives that can be reached through the right messaging. And it can help guide the development of persuasive messages.

Let’s look at the components of health communication. Click on each image to see the definition.
2.12 Components of Health Communication

Notes:

When using the components of health communication, is it useful to ask specific questions for each one. Click each image to reveal the questions.
2.13 Components of Health Communication

Notes:

Let's look at some practical considerations for improving the likelihood of
developing an effective health communication message. Click each image to reveal tips for each component. After you’ve read the three sections click the resource icon to explore the message review criteria developed by the Health Promotion Capacity Building team at Public Health Ontario.

2.14 Case Study

![CASE STUDY](image)

Check out the immunize.ca website to learn more about their health communication campaign. Be sure to look at their app and posters.

Notes:

Let’s look at a case study to see how health communication can be applied.

Often times, multiple health communication activities are integrated into a comprehensive communication campaign.

Immunize dot ca is an example of a health communication strategy that does this, because it (87):

- is a campaign that is goal-oriented and attempts to inform, persuade or motivate behaviour change
• addresses multiple levels (from individual to society)
• occurs annually during the fall season, when seasonal influenza incidence tends to rise
• involves an organized set of communication activities, including posters, online videos, and an app
• highlights the impact of influenza on young children, adults, and the elderly

2.15 Interactive Activity

Notes:
Let’s reflect on what we’ve learned about health communication. Examine the ad and think about what makes it effective? Hover over the markers to check your understanding.
The next health promotion strategy we will explore is health education.
2.17 What is Health Education?

"Any combination of learning experiences designed to help individuals and communities improve their health, by increasing their knowledge or influencing their attitudes." (88)

Notes:

Health education is any combination of learning experiences designed to help individuals and communities improve their health, by increasing their knowledge or influencing their attitudes." (88)

Historically, health education was used as a ‘catch-all’ term for disease prevention methods that pre-dated the emergence of health promotion. With the emergence of health promotion, health education has been re-defined as one of many health promotion strategies.
2.18 Differences between Health Education and Health Communication

Notes:

You may notice some degree of overlap between health education and health communication. In fact, health communication campaigns are often designed for the explicit purpose of educating individuals and communities about particular health issues.

However, there are differences between the two strategies:

Unlike health communication campaigns, which are usually directed at large audiences, health education is often done through one-on-one sessions, small groups or classes.

Health education sessions are often participant or learner-directed, thereby allowing for more flexibility in accommodating diverse needs and learning styles, and are generally tailored to specific learning needs.
2.19 Limitations of Health Education

Notes:

Today, health education is seldom used as a ‘stand-alone strategy’ - it’s most effective when used in combination with other strategies such as community mobilization and policy change. (89)
2.20 When to use Health Education?

Health education is most effective for bringing about change at the individual or community level.

Notes:
In practice, health education strategies are most often used to bring about change at the individual or community level. (37,39)
2.21 Practical Application

When using health education, strive to involve participant input.⁹⁰

Notes:

Like the health communication components discussed in the previous section,
health education should also involve audience analysis, setting objectives and careful construction of messages and materials.

However, health education opportunities should involve as much participant input in planning, delivery and evaluation as possible.

A true participatory approach is one in which many perspectives, especially those of participants in a program or process, are heard and respected. This should happen as objectives are set, content is chosen, information is delivered and effectiveness is discussed. Those with less education and ‘status’ may need extra support to voice their thoughts throughout a participatory process.

Some ways of involving participant input in planning, delivery and message development could be through the use and implementation of surveys, questionnaires, interviews, and focus groups. Because participant opinions, views and experiences are highly valued in this process it can foster sense of ownership and support for the endeavour. (90)

The University of Kansas Community Toolbox is a great database to use for participatory planning, implementation and evaluation resources. Search on any one of these topics for a comprehensive list of how-to’s. Click on the resource icon to go to the toolbox. (91)
Let's illustrate health education with an example from Toronto Public Health. The
Healthiest Babies Possible program is for women at risk of having a low birth weight baby. Many of the women in this category have a low-income and are socially isolated and may have language and literacy barriers that block them from accessing health information.

Women identified as ‘at-risk’ are invited to attend on-site information sessions, where they have access to small group and one-on-one sessions with registered dieticians and public health nurses. Participants attend the sessions weekly, and receive information about nutrition and healthy meals, as well as breastfeeding and healthy infant feeding. These education sessions are tailored to meet the unique needs of the participants, and are considerate of cultural values and ethnic norms, language, and literacy levels. Participants are able to voice their questions and priority needs to ensure that their main concerns are addressed. To ensure that participants’ nutritional needs are being met, food vouchers and vitamin and mineral supplements are provided. Participants are also reimbursed for their transportation costs to and from the classes to make it easier for them to attend. (92,93)

Click the resource icon to learn more about the Healthiest Babies Possible program.
2.23 Health Education and Behaviour Change

The participatory nature of health education makes it amenable to building skills, empowerment and capacity, and for exerting social pressure.

Notes:

Health education is particularly useful for addressing some aspects of behaviour
change theory that health communication is not well suited to. The participatory nature of health education makes it amenable to building skills, empowerment and capacity, and for exerting social pressure.

**2.24 Case Study: Safe Sex Practices**

Apply the Health Belief Model to health education strategies for promoting safe sex practices.

**Notes:**

In module four we discussed individual level theories, specifically the Health Belief Model.

The Health Belief Model can be used as a framework for understanding health behaviour, and as a guide for developing key messages for interventions. The model demonstrates the importance of individual beliefs about severity, consequences, the effectiveness of a recommended action and the overall cost/benefit balance of a preventative action. (36)

In module four we discussed an example that applied the Health Belief Model to safe sex practices. According to the Health Belief Model, individuals are more likely to practice safe sex to prevent HIV infection if they believe that:

- they are at risk of HIV infection,
• the consequences of HIV infection are serious,
• safe sex practices (for instance, condom use) are effective in reducing the risk of infection, and
• the benefits of safe sex practices outweigh the potential costs and barriers. (36)

The constructs of the Health Belief Model can be applied to a health education strategy because they can help shape key messages for the intervention.

2.25 Stop and Think

How might you ensure that a series of classes for seniors about fall prevention are participatory and learner centered?

Notes:

Take a moment to reflect on what you’ve learned about health education. Let’s use a real life example: how might you ensure that a series of classes for seniors about fall prevention are participatory and learner centered? Type your answer in the box provided. When you have given an answer, press the magnifying glass icon to compare your answer to the sample response we have provided.
STOP AND THINK

Our Answer
The most effective way of doing this is to directly involve participants in planning the classes. Strategies include:
- Preparing a needs assessment for distribution to potential participants. The needs assessment could include questions about possible topics (e.g., home safety tips), suggestions for guest speakers and preferred learning styles.
- Including participants as part of the committee or group responsible for developing the classes.
- Giving seniors decision-making authority in identifying course content and formats for learning, with organization staff serving as facilitators.
- Participants can also be involved in the implementation of the classes. This could involve seniors playing an active role in delivering content or facilitating group discussions.
- Participants should play an active role in the development, implementation and review of an evaluation assessing the extent to which the classes met their needs around falls prevention.

Your Answer

2.26 Quiz Question

(Drag and Drop, 10 points, 1 attempt permitted)
### Drag Item vs. Drop Target

<table>
<thead>
<tr>
<th>Drag Item</th>
<th>Drop Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strives to be inclusive of participant’s needs</td>
<td>HE drop</td>
</tr>
<tr>
<td>Uses mass media and events</td>
<td>HC drop</td>
</tr>
<tr>
<td>Large audience</td>
<td>HC drop</td>
</tr>
<tr>
<td>One-on-one</td>
<td>HE drop</td>
</tr>
<tr>
<td>Uses channels and vehicles to convey message</td>
<td>HC drop</td>
</tr>
<tr>
<td>Can be tailored to different learning styles</td>
<td>HE drop</td>
</tr>
</tbody>
</table>

### Drag and drop properties

<table>
<thead>
<tr>
<th>Drag and drop properties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Snap dropped items to drop target (Tile)</td>
</tr>
<tr>
<td>Delay item drop states until interaction is submitted</td>
</tr>
</tbody>
</table>

### Notes:

Let’s test our knowledge.

Match the characteristic to the appropriate health promotion strategy.
Incorrect (Slide Layer)

Correct (Slide Layer)

That’s right! You selected the correct response!
3. Review

3.1 Review

Notes:

This brings us to the end of module 7-health promotion strategies: part one. We began this module by outlining two learning objectives. The first indicated that by the end of this module you would be able to explain, compare and contrast health communication and health education.

- Health communication is the use of communication strategies to influence individual decisions that enhance health. Although a strategy in its own right, it is most useful as a support for other health promotion strategies. There are many health communication how-to models. In all of them, audience analysis, setting objectives and audience testing of messages and materials are critical components.

- Health education is any learning experience which helps individuals and communities improve their health, by increasing their knowledge or influencing their attitudes.
3.2 Review

Notes:

There are a few similarities between health communication and health education:

- Both seek to inform individuals, groups and communities about health issues.
- And, both are most effective when used in combination with other health promotion strategies.
3.3 Review

Learning Objective #1 (continued):
Explain, compare and contrast health communication and health education

<table>
<thead>
<tr>
<th>Health communication</th>
<th>Health education</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Large audiences</td>
<td>✓ One-on-one sessions, small groups and classes</td>
</tr>
<tr>
<td>✓ All levels of ecological framework</td>
<td>✓ Individual and community levels of ecological framework</td>
</tr>
<tr>
<td>✓ Not based on behaviour change theory</td>
<td>✓ Incorporates aspects of behaviour change theory</td>
</tr>
<tr>
<td>✓ Uses mass media and events</td>
<td>✓ Uses participatory approach</td>
</tr>
<tr>
<td>✓ Uses channels and vehicles to convey message</td>
<td>✓ Message reflects participant's needs and learning style</td>
</tr>
</tbody>
</table>

Notes:

There are key differences between health communication and health education:

• Health communication campaigns are usually directed at large audiences, while health education is often done through one-on-one sessions, small groups or classes.

• Health communication is suited for all levels of the ecological framework, health education is best suited for the individual and community levels.

• Health education is better for addressing certain areas of behaviour change theory due to its participatory nature.
3.4 Review

**Notes:**

The second learning objective stated that by the end of the module you would be able to apply the strategies of health communication and health education to promote health.

- We learned that there are numerous ways of applying health communication. In all of them, audience analysis, setting objectives and audience testing of messages and materials are critical components.
- In addition, the channel and vehicle are important to keep in mind when constructing a health message.
3.5 Review

Learning Objective #2 (continued):
Apply the strategies of health communication and health education to promote health.

Health education

- Should involve participant input in planning, delivering and evaluating an endeavour
- Surveys, questionnaires, interviews and focus groups are good ways of involving the audience and fostering a sense of ownership and support

Notes:

- Health education should involve participant input in planning, delivering and evaluating an endeavour.
- Surveys, questionnaires, interviews and focus groups are good ways of involving the audience and fostering a sense of ownership and support.
3.6 PHO Health Promotion Capacity Building

For service request inquiries, including consultations, webinars, workshops, or to sign up for our mailing list, please go to:


Our events calendar is at:

http://www.publichealthontario.ca/en/LearningAndDevelopment/Events/Pages/default.aspx

Notes:

This resource is supported and maintained by the health promotion capacity building team at Public Health Ontario. We offer a variety of health promotion services including consultations, webinars, in person workshops and resources related to health promotion planning, evaluation, health communication and building healthy public policy.

To request a service or for more information, please follow the links on this slide.
3.7 Thank you

Thank you for your participation in Module Seven of the Health Promotion Foundations Course: Strategies for health promotion-Part One: health communication and health education.

Please take a few minutes to provide your feedback on this module and the content we have covered.
4. Help Tab

4.1 Navigation Menu

- Compare Answers: click this icon to see our response to the exercise
- Resource: click this icon for further reading
- Close Button: clicking on the ‘X’ button will close any window

Notes:
5. Lightbox

5.1 Untitled Slide

<table>
<thead>
<tr>
<th>MESSAGE REVIEW CRITERIA®</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The message must get and maintain attention.</td>
</tr>
<tr>
<td>2. Put strongest points at beginning.</td>
</tr>
<tr>
<td>3. The message must be clear.</td>
</tr>
<tr>
<td>4. The change requested is easy.</td>
</tr>
<tr>
<td>5. Incentives provided.</td>
</tr>
<tr>
<td>6. There is good evidence of benefits/threats associated with making/not making change.</td>
</tr>
<tr>
<td>7. The source is credible.</td>
</tr>
<tr>
<td>8. The message is believable.</td>
</tr>
<tr>
<td>9. The tone is appropriate.</td>
</tr>
<tr>
<td>10. The appeal (rational-emotional) is appropriate.</td>
</tr>
<tr>
<td>11. The audience is not harmed.</td>
</tr>
<tr>
<td>12. Identity is displayed.</td>
</tr>
</tbody>
</table>

Notes:

Have a look at the criteria listed on the screen. Think about whether this list of criteria would change your original assessment of message development. In what ways?
6. drag and drop reset

6.1 Untitled Slide