

## **Project 14**

**Course Code and Name:** MSJ 3262 Health Communication

**Project Name:** Strategic Behavioural Change Approach Communication Plan for Promoting the Importance of Health Literacy among ULAB Campus Students

**Project Type:** Report

**Project Date:** Fall 2023

### **Project Introduction:**

For this course, I designed a SBCC based plan to boost the health literacy amongst ULAB students. Through the means of a quick survey of about 28 respondents, I managed to derive a baseline that suggested a very vague & mixed understanding of basic health concepts, reliance on informal sources of knowledge and a low willingness in seeking professional medical care & support. This plan is based on Specific, Measurable, Achievable, Relevant, Time-bound (SMART) goals designed to raise awareness on the core concepts of health and wellbeing by up to 25% amongst the targeted audience. This is achieved through a mix of workshops, seminars, social media content, campus wide posters & Q/A sessions in peer forums and also calls for more inclusion in the general study curriculum. My project is based on Health Belief Model, & Social Learning Theory & Diffusion of Innovations Theories to drive students from theory to action.

### **Project Justification:**

ULAB has a very diverse student body spanning multiple age groups, however one of the unified metric prevalent amongst all is the general lack of awareness on basic health literacy. Students are routinely exposed to stress, dietary anomalies and impact, sleep issues & a overt reliance on informal knowledge resources, exposure to misinformation, little to no knowledge of the available medical services / insurance points to a protracted knowledge-to-action gap. Increased health literacy and awareness on the other hand directly supports to alleviate a lot of health issues, supports prevention & timely care and in turn may even impact academic performance for the better. As such, this project is very critical in addressing a major issue that is deeply relevant amongst the students of ULAB.

**Project produced under this course:**



Title: Strategic Behavioral Change Approach Communication Plan for Promoting the Importance of Health Literacy among ULAB Campus Students

Course Code: MSJ 3262

Course name: Health Communication

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## **Strategic Behavioral Change Approach Communication Plan for Promoting the Importance of Health Literacy among ULAB Campus Students**

The University of Liberal Arts Bangladesh is a private educational Institution established in the year 2002. It is one of the largest institutions of higher learning in Bangladesh, with its main campus in Muhammadpur Dhaka. The total number of students currently enrolled in this institution is around four thousand. the demographic decomposition of the current student body reflects that a good number of students with diverse ethnic and economic backgrounds attend this university. As a natural consequence, The awareness and knowledge of the general student body, when it comes to the field of health literacy, varies a lot. In this report, we propose a strategic communication plan in order to promote and promulgate the Importance of so-called Health literacy among students on campus.

A multitude of parameters directly or indirectly affect the overall well-being of ULAB students, the primary reason being a lack or disinterest in physical activity. Next is the rate of consumption of high-calorie fast food with low nutritious values. This intuitively seems to be more prevalent among the students with food insecurity. In addition, these inadequate coping mechanisms offered by the university for handling academic and personal stress implicitly contribute to the detriment of mental well-being for most students. An often overlooked reason is substance abuse among many students. all of the mentioned reasons play a role in the overall well-being of students on campus, and these could be easily connected to an immense lack of health literacy among the student body.

Among all the aforementioned problems, I have made the decision to work on health literacy. Health literacy is defined as an individual's ability to obtain, comprehend, and use health information to make informed decisions and take appropriate actions for maintaining or improving their health. It involves a range of skills, including reading, writing, numeracy, and critical thinking, all applied within the context of both physical and mental health.

Importance of this project and intervention:

I have conducted a small survey among the students of ULAB, and I have observed that Most students are either nonchalant or indifferent when it comes to having a well-rounded education on the importance of health literacy or even the minimum definition of it. Most students exhibit a lack of urgency in researching both physical and mental health being. most are unaware of the basic primary resources to harness information about living a healthy life. my mission is to introduce some productive and positive change in this Behavior. I would like to promote a better understanding of health literacy, which is much more than sporadic information about health-related issues. Health literacy, by definition, refers to the ability to properly access, search, and find correct and helpful information related to physical and mental well-being, as well as the ability to make educated decisions based on that. I would like to raise awareness about the importance of developing and possessing health literacy skills, and that's precisely why I have chosen to work on this topic and develop a communication plan. I will also append the survey analysis report based on this.

This communication plan and intervention is very important for the following reasons:

- It can help students make more informed decisions about their health,

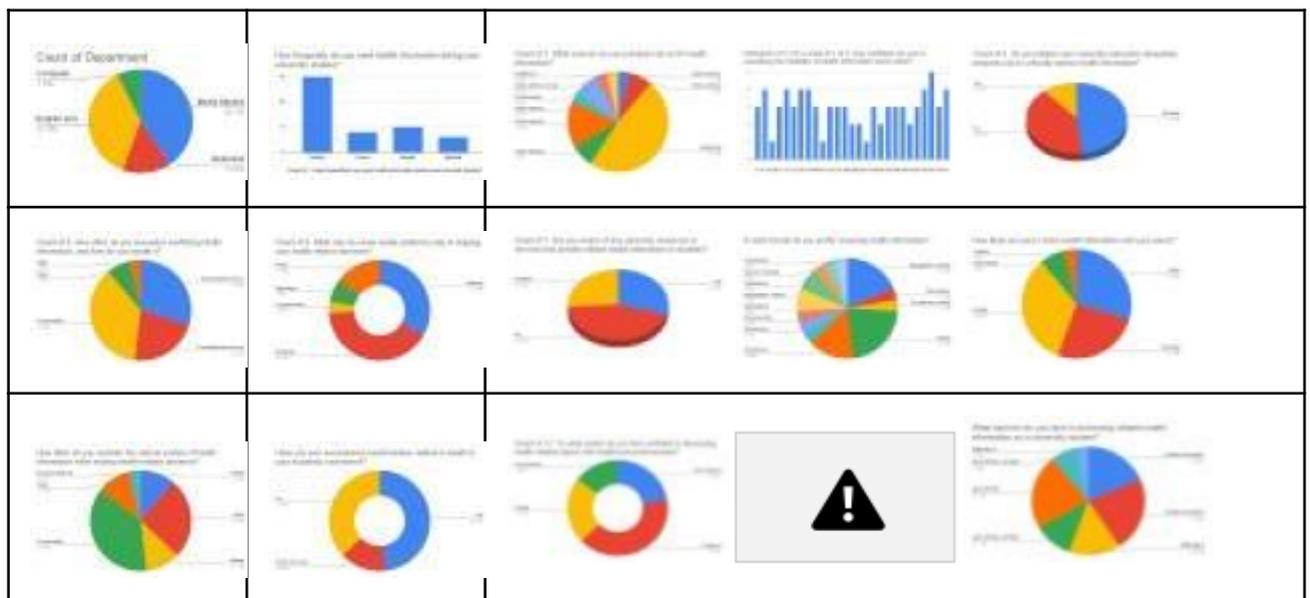
- it can help them understand how to navigate the healthcare system, use medical insurance, and seek medical help when needed,
- it can help prevent the outbreak of health issues on a mass scale,
- it will educate students on nutrition, physical exercise, mental health and several other aspects of general well-being,
- it provides info about lifestyle management, academic stress management, sleep hygiene, substance use prevention, vi) it will help them understand how to navigate the healthcare system, use insurance, and seek medical help when needed,
- better health literacy will correspond to better health, hence better academic performance, viii) the overall ULAB community will benefit from these; a campus with a high “health literacy” rate axiomatically will be a healthier campus in all senses of the word.

I have developed the following SMART objective, as formulated by (Doran, 1981), for promoting health literacy among students. The outline is as follows:

**Specific:** I have developed a detailed health literacy program focusing on educating the students of ULAB about their healthy lifestyle choices, preventive health measures, and accessibility to dependable and factual health information.

**Measurable:** The goal of this objective is also to increase the percentage of students who are able to demonstrate a well-rounded understanding of rudimentary Health Concepts by 25% as measured by pre and post-program assessments.

**Achievable:** The objective is to be made achievable by direct collaboration with local medical experts, creating engaging and culturally relevant educational materials, and utilising existing University resources in order to facilitate the entire program



**Relevant:** Relevancy is achieved by addressing the specific health needs and challenges faced by the common students in ULAB And by supporting the university administration's current commitment to student welfare

**Time-bound:** The plan is to launch this health insurance program at the very beginning of the next academic year and access the final outcomes at the end of the semester through a series of service and assessments. Key survey findings:

On a double-blind survey of 28 randomly selected ULAB students, we found that

- ULAB students “rarely” seek out medical help during their undergraduate years and
- about “half” of them rely on traditional “healthcare” professions for medical information
- 2) About “half” of the participants are unsure about deducing proper medical information from their assigned curriculum
- There is a split among students about getting health-related information from Social media, and there is a preference towards text articles and videos (infographics) as primary sources for these matters
- About “half” of the survey takers consider cultural contexts when getting health-related information and majority did receive some level of “misinformation”. Despite that, a good number of them are confident in discussing issues with professional healthcare providers
- Most students are more inclined to information that is authenticated by reputed sources and authors

### **The Health Belief Model**

The proposed communication plan on health literacy is well aligned with the Health Belief Model which was developed in the 1950s by psychologists at the US Public Health Service (Janz & Becker, 1984). It has a good amount of potency for explaining and predicting health-related behaviours, particularly regarding the uptake of Health Services offered by ULA.

### **Social Learning Theory:**

In addition to that, the proposed communication plan is also well aligned with the social learning theory that suggests the idea of acquiring new behaviours by the virtue of observing and emulating others (Bandura, 1971).. The proposed communication plan ensures that health literacy is a definitive cognitive process occurring within the social context, purely through direct observation or instruction.

### **Theory of Diffusion of Innovation:**

I have tried to optimise the plan in accordance with the theory of diffusion of innovation. It hinges on the fact that innovation is diffused most effectively by the means of communication among the participants in a social structure (Kaminski, 2011).. Five main elements of Social diffusion of information that are (i) the Innovation itself, (ii) the adapters, (iii) the relevant communication channels, (iv) allotted time, and (v) the host social system, are all key stakeholders within this plan.

Intervention planning in accordance with the survey findings:

A Communication Plan for Enhancing Health Literacy through Dialogue and Outreach:

Identifying key stakeholders:

1. Faculty members,
2. enrolled students,
3. (ii) student organisations
4. Understanding the audience:
5. Identify specific and common health concerns different seasons and misconceptions among students.
6. continuously conduct mandatory health surveys to understand the current health knowledge level.
7. Establishing Common Dialogue Platforms Offline and Online:
8. Interactive Workshops:
9. Conduct regular workshops on key health topics.
10. Encourage group discussions and sharing of personal experiences.
11. Establish health Literacy Forums: establish online forums for continuous dialogue and Invite experts and students to share insights.

### **Using Social Media:**

Using widespread social media platforms like Facebook, Instagram, and Twitter to spread information, host live Q&A sessions on health-related matters with professional experts, and share engaging data visualisation regarding rudimentary healthy lifestyles. In addition to that, sharing bite-sized health tips and facts should be included in this plan.

Peer-to-Peer Engagement through University events, website and email Newsletters:

- Feature health-related content on the university websites and in other campus newsletters, providing articles and tips from peers.
- Posters, Flyers, and QR Codes: Design attention-catching visuals placed across campus, linking QR codes to online resources for in-depth information.
- (ii) Encourage mentoring through semi-regular check-ins from the university administration.
- Workshops and Peer Support Groups:
- Conduct interactive, immersive workshops and establish student-led support groups to encourage discussions.

### **Mobile Apps and SMS Alerts:**

Design Android/iOS applications focused on health literacy and send out regular SMS alerts regarding taking precautions against common diseases according to the season Integrate Health and general well-being in the university common curriculum:

Collaborate with faculty to integrate health literacy into various courses. Foster discussions related to health within academic settings.

Evaluating and adapting the plan :

- Analyzing the effectiveness of the current communication plan through sporadic surveys and feedback. It should be possible to make certain adjustments to better “fit” with the ever-evolving needs of the students.
- Celebrating success stories:
- Hosting events that recognise and celebrate noticeable improvements in health literacy rate.
- Give recognition to individuals and groups who contribute to constructive health discussions.

- Possible drawbacks, success and failure of the intervention
- Too much dependence on digital platforms might make it hard for those with limited internet access.
- The proposed peer mentoring could be very difficult if the assigned mentors lack proper training

### **Implementation Plan:**

Launch (Month 1):

Introduce the Health literacy program via university-wide announcements, posters, and social media posts from different accounts.

Engagement with students (Months 2-4):

Conduct workshops and projects, create campus support groups for physical and mental health, and share proper and relevant via website and newsletters.

Mobile Apps and SMS Alerts (Months 5-8):

Assign interest students to develop and launch Mobile apps for the health literacy program, organise webinars, collaborate with faculty, and utilise those mobile apps for continuous engagement. At the same time, with faculty support, slowly integrate Health and general well-being into the university's common curriculum.

Monitoring and Adaptation (continuous process):

Conduct regular statistical evaluations via surveys and feedback to adapt the plans to student needs and preferences.

Celebrating success stories (end of the program ~ Month 8-10):

Host events that recognise and celebrate noticeable improvements in the overall health literacy rate for students on campus.

### **Conclusion:**

In summary, we have conducted a survey on approaches to health literacy over 28 randomly chosen students, summarised the key findings, and proposed a Strategic Behavioral Change Approach Communication Plan spanning over ten months for promoting the Importance of Health Literacy among ULAB students. The figures for the survey findings are appended at the end of this paper, along with the bibliography.

### **Bibliography:**

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- Janz, N. K., & Becker, M. H. (1984). The health belief model: A decade later. *Health Education Quarterly*, 11(1), 1-47.
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**Self-Reflection:**

This project taught me how to design a feasible campaign that is clear and deeply grounded with ethics. It also allowed me to apply Health Belief Model, & Social Learning Theory & Diffusion of Innovations Theories, into actionable points that are SMART in nature. For future interactions I would widen my survey pool to get a better understanding of the various age groups and also pilot test some of the communication materials in order to gauge the impact so as to finetune the strategy for greater reach and sustained impact.