

Step Twelve

Evaluation (p.61)

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Introduction to Evaluation (p.61)

- Though it has its own step (12), it really applies all through steps 2-12.
- Evaluation should be included as part of campaign development in order to (p 61 wkbc):
 - Ensure maximum effectiveness.
 - Be accountable to funders.
 - Aid in the dissemination of knowledge so that others can learn from our experience.
 - Enhance community standing of organization.
 - Predict the results of a program, measure the results or help determine why results occur.

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Three Types of Evaluation (p.62)

- Formative evaluation includes audience analysis and pre-testing. Purpose is to maximize chance of success before starting.
- Process evaluation examines how a program in progress is operating.
- Summative evaluation methods usually consist of a comparison between audience's awareness, attitudes and/or behaviour before and after.

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Formative Evaluation Questions

- Audience Analysis
 - Who needs or wants our service?
 - Who cares about our issue?
 - How can we reach them?
- Pre-testing
 - Did people understand?
 - Is information accurate, attractive, credible?

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Process Evaluation Questions

- Planning
 - Was the money spent well?
 - Did the timeline work?
- Monitoring/Tracking Implementation
 - How many?
 - Who did we reach? How did they respond?
 - Media coverage?
 - Did we act in the right way?

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Summative Evaluation Questions

- Short Term
 - Who responded?
 - What was the impact?
 - What changes in knowledge/attitudes occurred?
- Long Term
 - What are the benefits compared to the costs/other program alternatives?

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Evaluation and the 12 Steps

Health Communication Step	Applicable Type of Evaluation
1. Project Management	Formative: Situational Assessment
2. Revisit Health Promotion Strategy	Formative: Logic Model
3. Analyze and Segment Audiences	Formative: Audience Analysis
4. Develop Inventory of Resources	
5. Set Communication Objectives	Summative: Set Comm. Objectives/Indicators
6. Select Channels and Vehicles	Process: Set Implementation Objectives/Indicators
7. Combine and Sequence Activities	Process: Set Implementation Objectives/Indicators
8. Develop the Message Strategy	Formative: Pretesting
9. Develop a Project Identity	Formative: Pretesting
10. Develop Materials	Formative: Pretesting
11. Implement Your Campaign	Process: Advertising Model Summative: Impact Monitoring Model, Experimental/Quasi-experimental
12. Complete Campaign Evaluation	All types: Analysis, Interpretation, Action

The Health Communication Unit Logic Model



Three Summative Evaluation Models: page 72

- The Advertising Model
- The Impact Monitoring Model
- The Experimental Model

Step 12: How to Evaluate Health Promotion Programs

1. **Get Ready to Evaluate**
 - Establish clearly defined goals and objectives
 - Identify measurable success indicators
2. **Engage Stakeholders**
 - Understand stakeholders' interests and expectations
 - Engage stakeholder participation
 - Develop evaluation questions
3. **Assess Resources For the Evaluation**
 - Determine availability of staff and resources and amount of money allocated for evaluation
4. **Design The Evaluation**
 - select type of evaluation to be conducted
 - design evaluation framework
 - consider ethical issues and confidentiality
5. **Decide on qualitative versus quantitative methods**
 - Assess strengths/weaknesses of different methods of measurement
 - Select your sampling design



How to Evaluate (con't)

6. **Develop Work Plan, Budget, and Timeline for Evaluation**
7. **Collect the Data Using Agreed Upon Methods and Procedures**
 - Pilot test
 - Collect data
8. **Process and Analyze the Data**
 - Prepare data for analysis
 - Analyze data
9. **Interpret and Disseminate the Results**
 - Interpret
 - Present
 - Share
10. **Take Action**

Can health communication campaigns work?



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Can health communication campaign's work?



- Most researchers agree they can impact on awareness, knowledge and attitudes.
- However, the research on the major trials over the last two decades (Stanford, Minnesota, COMMIT) has fostered skepticism about the effects on behaviour.
- In his recent book, Professor Hornik concludes that **"There is good evidence for the effects of public health communication"**.

Andreasen, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly. Vol VIII, No. 3.

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Hornik's comments on effectiveness (1)



- Exposure is the key.
- A minimal level of exposure may be necessary before any effects can be observed. This may explain why the well-known, massive trials have not shown dramatic results – the difference in exposure between intervention and comparison sites has not been large enough.

▪ As reprinted in Andreasen, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly. Vol VIII, No. 3.

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Hornik's comments on effectiveness (2)



- Communication effects can manifest themselves along any or all of three pathways:
 - First they can influence individual behaviours directly.
 - Second, they can influence the media and opinion leaders so as to change social norms.
 - Third, policy-makers can be alerted to the need for structural changes, which they then bring about.

▪ As reprinted in Andreasen, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly. Vol VIII, No. 3.

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Hornik's comments on effectiveness (3)



- Many of the communication effects are not due to planned interventions by interested 'change-makers', but due to the increased media attention to the issue.
- The presence of these secular trends may make it difficult to detect campaign effects.

▪ As reprinted in Andreasen, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly. Vol VIII, No. 3.

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Hornik's Tips on Evaluation (1)



- Do not avoid using important message channels (e.g. national advertising) merely because messages might spill over into control communities. This can seriously diminish exposure level.
- Make sure measures are taken at multiple points over time – effects can be immediate or delayed.
- Allow comparison's with an unexposed population.

As reprinted in Andreasen, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly. Vol VIII, No. 3.

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Hornik's Tips on Evaluation (2)



- Have a model that can demonstrate a pathway between communications and effects (e.g. through exposure, knowledge gain, attitude change, etc.)
- Cross-validate results through multiple analytic approaches.
- Focus measurements on those whom the campaign is supposed to effect, not the general population.
- As reprinted in Andreason, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly, Vol VIII, No. 3.

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Hornik's Tips on Evaluation (3)



- Remember that the impact of communication can be through one of three pathways, so be sure to measure the possible influence of all three.
- Consider the potential for secular effects and find ways to factor them out of the analysis.
- As reprinted in Andreason, A. 2002. Book review of "Public Health Communication: Evidence for Behaviour Change by Robert Hornik. 2002". In Social Marketing Quarterly, Vol VIII, No. 3.

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Why Campaigns Fail



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Why Campaigns Fail (1)



- For the large majority of individuals who are not receptive to performing the behaviour, there are a series of resistance barriers.
- Most elemental problem is the inability of the campaign to reach the audience and attain adequate exposure to the messages (due to either low volume or design elements).

From Atkin, C. 2001. Impact of Public Service Advertising: Research Evidence and Effective Strategies. Project conducted for Kaiser Family Foundation.

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Why Campaigns Fail (2)



- Other barriers:
 - Misperception of susceptibility to negative outcomes
 - Deflection of persuasive appeals
 - Denial of applicability to self
 - Rejection of unpalatable recommendations
 - Perception that messages are offensive, disturbing, boring, stale, preachy, confusing, irritating, misleading, irrelevant, uninformative, useless, unbelievable, or unmotivating.

From Atkin, C. 2001. Impact of Public Service Advertising: Research Evidence and Effective Strategies. Project conducted for Kaiser Family Foundation.

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Why Campaigns Fail (3)



- Some messages may produce boomerang effects that run counter to the campaign objectives or that undermine other health practices:
 - Alarming statistics or portrayals of misbehaviours or victims may normalize behaviour
 - Portraying behaviour as risky may appeal to risk-takers in the audience
 - Forbidden fruit might sell the fruit
 - Highly threatening appeals may backfire without a strong efficacy component
 - Exaggerated claims may undermine credibility

From Atkin, C. 2001. Impact of Public Service Advertising: Research Evidence and Effective Strategies. Project conducted for Kaiser Family Foundation.

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Why Campaigns Fail (4)



- More boomerang effects:
 - Emphasis on negative outcomes may produce desensitization
 - Audiences may shift problems. For example, if adolescents are successfully scared away from marijuana, they may drink more heavily. If teenage drinkers adopt the heavily promoted designated driver program, non drivers may drink more heavily. If teenage drivers are convinced that safety belts will protect them, they may drive faster and suffer high-speed crashes.

From Atkin, C. 2001. *Impact of Public Service Advertising: Research Evidence and Effective Strategies*. Project conducted for Kaiser Family Foundation.

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Why Campaigns Fail (5)



- Many organizations that sponsor campaigns (and designers) succumb to various temptations:
 - Regarding focal segment as ignorant or misguided
 - Righteous
 - Extremist (promoting behaviours that are unpalatable to audience)
 - Too politically correct (staying within tight boundaries of propriety to avoid offending authorities or interest groups)
 - Seeking to impress colleagues
 - Emphasizing fancy design over solid content

From Atkin, C. 2001. *Impact of Public Service Advertising: Research Evidence and Effective Strategies*. Project conducted for Kaiser Family Foundation.

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Why Campaigns Fail (6)



- Many campaigns simply do not follow good campaign planning and design procedures that are known to be the absolute minimum requirements for a successful campaign.
- Even well-designed campaigns are often unsuccessful – if you don't follow basic 'best practices' (such as THCU's 12-step process), you don't have a hope of being effective.
- Consider the following study.

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Why Campaigns Fail (7)



- 2000 study of 50 published nutrition and/or physical activity social marketing campaigns.
- Examined:
 - Goals and reporting on goals
 - Planning and background gathering techniques
 - Use of behavioural theory
 - Identification of target audiences
 - Audience analysis and segmentation strategies
 - Levels of intervention
 - Channel selection
 - Formative and summative evaluation
- Alcalay, R. & Bell, R. *Promoting Nutrition and Physical Activity Through Social Marketing: Current Practices and Recommendations*. June 2000. For the Cancer Prevention and Nutrition Section of California Department of Health Services. Available from Center for Advanced Studies in Nutrition and Social Marketing.

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Findings



- Fewer than 1/3 of campaigns expressed goals in measurable terms.
- Goals were rarely formulated on the basis of data descriptive of target audiences.
- Many campaigns did not mention any theory whatsoever.
- Audience segmentation strategies were primarily based on demographics (usually age) and only occasionally made use of psychological and lifestyle principles.
- Only a minority of campaigns conducted any consumer research and often that research was not described.
- Individual behaviours were more likely to be the focus of change efforts than family practices and/or community norms/activities.

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Recommendations



- More attention should be paid to setting realistic, specific and measurable objectives.
- Social marketing concepts should become more central to campaigns, which often mention this framework but do not integrate it into planning.
- Behavioural theories should be more actively applied to campaign designs.

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Recommendations con't



- Audience segmentation and research should be more central to the planning of campaigns.
- Communication strategies should be formulated based on better information about target audiences' communication patterns.
- Better understanding of message design decisions is needed.
- A major thrust of campaigns should be altering the social and physical environment.
- Other researchers have drawn similar conclusions.

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Why campaigns fail (9)



- Stanford was one of the most effective communication campaigns. Why?
 - financially well endowed,
 - intensive,
 - long-term,
 - used formative evaluation,
 - used media to initiate interpersonal communication,
 - daring and original in its concepts,
 - run by a very prestigious organization,
 - skilled, interdisciplinary team development.
- Unfortunately, these conditions are seldom met.
- From Atkin, C. & Schiller, L. 2002. The Impact of Public Service Advertising. In Shouting To Be Heard: Public Service Advertising in a New Media Age. Kaiser Family Institute.

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Why campaigns fail (10)



- A fundamental failing of evaluations is that they lack a clearly defined "theory of change". A theory of change is how program and evaluation stakeholders believe specific program components will lead to anticipated outcomes in their target populations.
- Carroll, A.M. Samuels, S.E. Community-Based Health Initiative Evaluation Review. Partnership for the Public's Health. June, 1999. Unpublished (cited in Evaluating Nutrition and Physical Activity Social Marketing Campaigns: A Review of the Literature for Use in Community Campaigns. Carroll, A., Craypo, L. & S. Samuels. For the Centre for Advanced Studies in Nutrition and Social Marketing – University of California, Davis. December 2000).

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