Health Communication in Action: Theoretical Foundations and Practical Applications

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Abstract

This study examines the field of health communication by reviewing existing literature and analyzing its role in addressing a wide range of public health challenges. Using qualitative content analysis, it explores health communication strategies in both emergency and non-emergency contexts, including the management of pandemics such as COVID-19 and Nipah. The research emphasises the need for evidence-based, context-specific communication approaches tailored to different populations, with a particular focus on marginalized communities. The study also highlights the importance of delivering accurate, accessible, and culturally relevant messaging to tackle communicable and non-communicable diseases, mental health concerns, and aging-related health issues. Findings emphasize the integration of theoretical frameworks into communication strategies to enhance clarity, stakeholder trust, and measurable public health outcomes. Effective health communication relies on a deep understanding of the audience, addressing knowledge gaps, utilizing trusted information sources, and adopting appropriate communication formats. By informed decision-making, strategic health communication contributes to sustained public health improvements.

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Health Communication, Public Health, Health Literacy, Communication Strategies

Introduction

Communication is a fundamental aspect of human life, enabling individuals to connect, share ideas, and build relationships. Among the many facets of life, health remains one of the most critical considerations. A healthy body and mind are central to well-being; their absence cannot be compensated by wealth, power, or fame. From the earliest days of human civilization, the pursuit of health and wellness has been a subject of continuous exploration, leading to the development of medicines, practices, and preventive measures.

Prevention, as the adage goes, is better than cure. To prevent diseases and injuries effectively, comprehensive knowledge is essential - this is where health communication plays a pivotal role. Health communication encompasses strategies designed to inform, empower, and encourage individuals and communities to make healthier choices. It draws upon various theories and models to promote positive behavioral and attitudinal changes.

Purpose of the Study

Effective communication in any domain is influenced by factors such as personal interest, attitudes, experiences, and the context in which communication occurs. In health communication, however, additional considerations come into play, including the selection of the target audience, appropriate medium, culturally relevant content, and tailored messaging. These elements must be adapted to the unique demographics, cultures, and priorities of diverse populations to achieve meaningful and impactful communication outcomes. By understanding these theoretical foundations, we can better design communication strategies that resonate with varied audiences and promote health and wellness on a broader scale in the regional context.

Hence this review study broadly examines the existing theories and frameworks of health communication, exploring their evolution, application, and relevance in addressing contemporary and regional health challenges. The existing health

communication programs and strategies in a regional context (In the south most state of Kerala in India) are also analysed, identifying gaps that hinder their effectiveness.

Specific Objectives

- 1. To review the existing literature on health communication.
- 2. To analyze emerging trends in health communication.
- 3. To identify strategies for enhancing the effectiveness of health communication at the regional context (state of Kerala in India).

Study Method

Since the study focuses on understanding health communication by reviewing existing literature in the field, a qualitative content analysis focussing on secondary data was employed. Relevant literature on health communication and health literacy at the global, national and regional level were carefully selected and analyzed.

Health Communication: Concepts, Definition and Overview

Maintaining a healthy lifestyle and effective communication are two fundamental pillars of human sustainability. When these elements merge into the discipline of health communication, it becomes a crucial area of research. Now, as we progress through the first quarter of the 21st century, health concerns have intensified due to the emergence of new pandemics such as COVID-19, SARS, swine flu, Ebola, mpox, H5N1, H5N5, yellow fever, and Zika, along with the increasing prevalence of lifestyle diseases, cancer, and HIV. The question of how to prevent these diseases remains critical to human survival. Extensive research is being conducted worldwide to develop vaccines for various diseases. When COVID-19 emerged, claiming the lives of 700,000 people globally, scientists successfully developed vaccines to combat it. However, the pandemic also underscored the crucial role of communication in managing public health crises. Governments launched massive communication campaigns to educate citizens

about health risks and disease prevention, highlighting the importance of clear and effective messaging in safeguarding public health.

According to Clancy (2004), the "main currency of health care in the 21st century" is health communication. In recent years, many scholars and organisations from various fields have been attempting to define or redefine health communication. However, due to its multidisciplinary nature, several of these definitions may seem relatively distinct from one another. Within the fields of communication, sociology, anthropology, cultural studies, linguistics, and medical literature, we can define health communication. Therefore, the context defines what it is. But most point to the role that, "health communication can play in influencing and supporting individuals, communities, healthcare professionals, policy makers or social groups to adopt and sustain a behavioral practice or a social or policy change that will ultimately improve health outcomes" (Schiavo, 2007). It depends on discrete communication strategies or action areas including, inter personal communications, public relations, public advocacy, community mobilization and professional communications (WHO, n.d.).

The International Communication Association's Health Communication Division was established in 1975, marking the first acknowledgement of health communication as a subset of communication. In 1985, a division of the National Communication Association was established. Health communication was formally acknowledged as a part of the American Public Health Association's Public Health Education and Health Promotion division in 1997. The peer-reviewed journal 'Health Communication' was established in 1989, and the Journal of Health Communication followed seven years later (Freimuth & Quinn, 2004).

Understanding health communication is essential for public health professionals and government bodies to promote healthy behaviors at local, national, and global levels. Health communication explores how various strategies can inform individuals about their health and influence their behaviors, enabling them to lead healthier lives (Alu, 2023).

This field integrates concepts from multiple disciplines, including public relations, marketing, social cognitive theory, and communication theories. Kreps (1998) defines health communication as "the central social process in the provision of health-care delivery and the promotion of public health," emphasizing its critical role in improving healthcare outcomes and public well-being.

In Encyclopedia of Health Communication, Teresa L. Thompson (2014) highlights the vital role of health communication in human well-being, emphasizing that "research that affects how long people live, their level of health during their lifespan, how they cope with health problems, and how communication affects their health brings with it a level of human relevance that is not available in all areas of study." Access to reliable health information is made possible through communication, enabling individuals to actively engage in the healthcare system - whether at home, in the community, or within medical institutions - when they receive timely, accurate, and persuasive health messages (Kreps & Neuhauser, 2015).

During health crises such as the COVID-19 pandemic, uncertainty and fear often lead to a surge in misinformation, disinformation, and myths. In such situations, the importance of health communication becomes even more evident. Effective communication not only dispels harmful myths - such as the false claim that hair dryers can kill the coronavirus (Alu, 2023) - but also educates the public on safety measures, provides real-time updates on containment zones, and guides healthcare professionals through best practices for managing crises.

Health Communication for Information and Influence

Many mistakenly believe that health communication is limited to disease awareness or prevention campaigns. However, it plays a much broader role in enhancing overall well-being. By shaping attitudes and influencing social norms, it helps people make informed health decisions. For example, campaigns have successfully reduced the stigma surrounding HIV and AIDS, encouraging more individuals to get tested. Similarly, effective communication helped dispel doubts about the safety of COVID-19 vaccines, increasing public confidence. As Smith & Hornik (1999) explain, health communication involves developing and delivering messages that promote healthy behavioral choices. According to the U.S. National Cancer Institute (2001), it can increase awareness, change perceptions, encourage action, and reinforce positive health behaviors. It also helps counter misinformation, advocate for health policies, and strengthen collaboration among health organizations. Ultimately, health communication is a powerful tool for promoting better public health outcomes.

Understanding Health Decision Makers

According to WHO (2017), health decision-makers are individuals or entities that utilize communication tools to make a range of health-related decisions. The primary goal of health communication is to provide information, guidance, and counsel to these key audiences, enabling actions that protect the well-being of individuals, families, communities, and nations.

Health decision-makers include individuals who make personal and family health choices, such as deciding whether to take the COVID-19 vaccine. Despite government recommendations, vaccine uptake varies; for instance, as of January 13, 2025, 70.47% of India's population had received at least one dose, while 65.29% were fully vaccinated (CoWIN Dashboard, 2025). Medical professionals also play a crucial role by making decisions about patient screening, diagnosis, and treatment. Also local, national, and international policymakers are responsible for shaping public health policies. Communities influence health outcomes by managing public spaces, events and services. Global organizations and stakeholders determine funding and oversee health initiatives. Lastly, WHO staff make critical decisions regarding programs, resource allocation, and internal and external communication. Each of these decision-makers plays a vital role in shaping global and public health outcomes.

Channels of Health Communication

Effective health communication campaigns rely on strategically selecting and utilizing communication channels. Messages are more impactful when disseminated through multiple platforms, ensuring that audiences receive information, guidance, and support from diverse sources. Identifying the most suitable channels is crucial for achieving communication objectives.

WHO says that several key factors should be considered when choosing communication channels. It is important to assess which channels are accessible to the target audience and which they prefer for receiving health information. Additionally, the effectiveness of a channel in helping audiences recall messages and engage in two-way communication must be evaluated. Inclusivity is also essential, ensuring that the communication needs of individuals with disabilities are addressed. The selection of channels should align with the campaign's

goals - whether raising awareness or encouraging behavior change. For example, if the objective is awareness, channels that maximize exposure and repetition should be prioritized, whereas behavior change efforts may require platforms that showcase real-life role models. Finally, resource availability must be considered, as certain channels, like television public service announcements (PSAs), may have extensive reach but involve significant production costs. By carefully mapping these factors, health communication campaigns can effectively influence public health outcomes.

The channels for health communication fall into three broad categories:

- **1. Mass media:** Television, radio, newspapers, magazines, direct mail, SMS, outdoor and transit advertising, and websites are the major mass media channels. PSAs can be used for free placement through these channels or even with a fee. However, the placement of the messages on particular platforms or at particular times is crucial.
- **2. Organization and Communities**: These channels target particular demographics based on shared interests, like occupation, or geography, like a particular village. Community-based events like health fairs, meetings at businesses, schools, and places of worship, and community-based media like local radio discussion shows and organisation newsletters are examples of these channels.
- **3. Interpersonal Communication**: Family, friends, co-workers, medical professionals, teachers, counsellors, and religious leaders are frequently the people who people turn to when they need guidance or want to share knowledge about health. The most reliable sources of health information are frequently these one-on-one conversations.

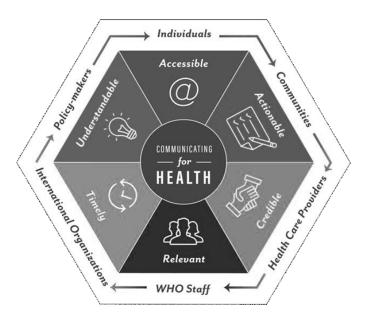
WHO's Principles for Effective Communication

WHO proposed six major principles for communication to make it more effective and useful. These principles include:

1. Accessible - The information should reach the target audience regardless of their abilities.

- 2. Understandable The audience can comprehend the received information effectively.
- 3. Actionable Information should be immediately available to the audience in order to handle the situation of the moment.
- 4. Relevant The information should be pertinent, appropriate, or crucial for a specified purpose.
- 5. Credible and Trusted The audience should trust the information that we give to them. It often depends on the reliability of the source. More credible information offers more 'right' actions.
- 6. Timely The information given at a time is fitting for its use.

Figure 1: WHO Principles for Effective Communication (Source: https://www.who.int/)



Whichever channels are used for health communication campaigns, it's important to ensure all these principles are followed, even if it's press releases, social media messages, advertorials, billboard ads, TV ads, etc.

Audience Centered Communication

Health communication relies on strategic tools to effectively influence target audiences. It is often directed toward specific demographic or geographic groups based on the nature of the health issue. For instance, if a Nipah virus outbreak occurs in Kerala's Malabar region, communication efforts should be concentrated there, rather than in other parts of the state unless the virus spreads or poses a broader threat. Similarly, while menstrual health campaigns primarily target women, raising awareness among men is also beneficial. Some scholars argue that all health messages should reach everyone, but considering practical constraints such as time, funding, and effort, prioritizing the most relevant audiences ensures greater impact.

The way a message reaches its audience, how it is perceived, and the reaction it generates are critical factors in health communication. For example, if a marginalized community lacks access to digital devices or the internet, relying solely on social media for outreach would be ineffective. Likewise, assuming that young people primarily consume information through newspapers may not align with modern media habits. This is where understanding the target audience and selecting the right communication channels become essential. Since audiences are highly fragmented, identifying their preferences and behaviors is key to successful health campaigns. The effectiveness of any health communication effort depends on thorough research into both the target audience and the communication environment. Therefore, a well-structured research strategy should be based on situational analysis and audience profiling (Schiavo, 2007).

Multi-Disciplinary Nature of Health Communication

According to Bernhardt (2004), health communication is a multidisciplinary, goaloriented approach that does not rely on a single theory or model. Instead, it integrates concepts from various disciplines, including communication, psychology, sociology, and anthropology, to enhance its effectiveness. The choice of theory or strategy for a health communication campaign depends on the specific context and the intended social or behavioral impact. Applying theoretical frameworks helps determine the most suitable approach to addressing a health issue and designing effective interventions. Schiavo (2007) categorizes the key theories used in health communication campaigns into three broad groups:

- 1. Behavioral and Social Science Theories: These focus on understanding individual and collective behaviors, motivations, and decision-making processes.
- 2. Mass Communication Theories: These explore how media influences public perception, awareness, and behavior change.
- 3. Marketing and Social Marketing Theories: These apply commercial marketing principles to promote health behaviors and encourage public engagement.

Based on these theories, health communication campaigns can be tailored to effectively reach and influence their target audiences.

Behavioural and Social Science Theories in Health Communication

The Behavioural and Social Science theories address the changes that occur in the individual, community and social levels. It emphasizes the relationship between individuals and their external environments. These theories include;

- 1. Diffusion of Innovation Theory (Rogers, 1962): This model provides a perspective on time and external conditions required to achieve behavioural and social change.
- 2. Health Belief Model (Becker, Haefner & Maiman, 1977): This model originally explains why people chose not to engage in initiatives that could aid in disease prevention or diagnosis.
- 3. Theory of Reasoned Action (Ajzen & Fishbein, 1980), proposes that a person's attitude towards a behaviour and his/her subjective norms about the behaviour contribute to accepting or performing that specific behaviour.
- 4. Convergence Theory (Rogers & Kincaid, 1981), emphasizes how crucial it is to communicate information, have mutual understanding, and agree on any group or collective action that would result in social change. It is expected of all participants in these communication processes to respect and consider the feelings, thoughts, and emotions of others.
- 5. Stages of Behavior Change Model (Prochaska & DiClemente, 1983), defines behavior change as a process that involves different stages, each of which represents a different level of motivation or change readiness.

The stages in this process include:

- a. Precontemplation: Individuals learn about the health behaviour despite no intention of adopting it.
- b. Contemplation: People started to think or ponder about adopting the suggested behaviour.
- c. Decision: People decide to adopt the recommended behaviour.
- d. Action: For a brief while, people make an effort to follow the suggested behaviour.
- e. Maintenance: For a long time, people stick to the suggested health behaviour and, ideally, make it a part of their daily routine and way of life.
- 6. Communication for Persuasion Theory (McGuire, 1984), suggested that, in order to assimilate and perform a new behavior, a person should pass through six interdependent stages which include:
 - a. Presentation of persuasive message
 - b. Receiver pays attention to the message
 - c. Comprehension of arguments conveyed in the message
 - d. Receiver agrees with message arguments
 - e. Message is retained or stored in the memory
 - f. Receivers behave in the line with the message arguments

According to McGuire exposure, attention, liking, and understanding the message is the core components in a communication campaign. They speak about conveying the messages to a large audience in a clear, appealing, and comprehensible manner.

7. Ideation Theory (Kincaid & Figueroa, 2004): More ideational elements like attitudes, knowledge, social and peer recognition and self-efficacy, that bear on to someone, there will be substantial probability that they will take on a healthy behaviour.

Mass Communication and Marketing Theories in Health Communication

Effective health communication relies on the strategic use of mass media channels to maximize impact. Newspapers, magazines, radio, television, social media, and the internet serve as key tools in connecting communicators with their audiences. Mass communication theories explore the effects of media on individuals and society, as well as how these effects can be amplified or mitigated.

One significant theoretical framework in this context is Cultivation Theory, proposed by George Gerbner (1969). This theory suggests that repeated exposure to mass media influences people's perceptions of reality, making mediated representations seem normal over time. In health communication, cultivation theory helps scholars understand how media content shapes health behaviors, both positively and negatively. Given the prevalence of media portrayals related to nutrition, body image, tobacco use, cancer, drug consumption, obesity, and women's health, this theory provides insights into how mass media reinforces unhealthy behaviors or, conversely, promotes positive health messages (Dutta et al., 2017). It also encourages research on the direct health effects of such portrayals and the responsibility of media in shaping public health discourse.

For health authorities and social action groups to effectively communicate their messages, it is essential to assess audience needs and cultural preferences through interpersonal communication methods, such as one-on-one discussions or group meetings (Schiavo, 2007). Also, health communication strategies can be informed by social marketing theories, which help design targeted interventions (National Institutes of Health, 2002). Public advocacy and public relations play a crucial role in raising awareness of health issues and urging governments and stakeholders to take appropriate action.

Regional Health Challenges in Kerala

Kerala, widely recognized for its strong health security framework, has effectively leveraged media for grassroots health communication. Beyond its well-established healthcare infrastructure, the state's health achievements are reinforced by social determinants such as high literacy rates, robust social security schemes, an efficient public distribution system, and fair labor practices. These

factors have played a crucial role in advancing key health indicators, including high life expectancy, low infant mortality, and reduced birth and death rates.

However, sustaining this progress presents significant challenges. Kerala is experiencing a rising burden of non-communicable diseases (NCDs) such as diabetes, hypertension, coronary heart disease, and cancer, along with age-related health issues. At the same time, the resurgence of communicable diseases - including COVID-19, Nipah virus, swine flu, dengue, leptospirosis, and chikungunya - poses an ongoing public health threat.

Additionally, emerging health concerns such as mental health disorders, suicide rates, substance abuse, adolescent health issues, and the increasing number of road accidents further strain the healthcare system. Vulnerable populations, particularly tribal communities and fisherfolk, face disproportionately poorer health outcomes compared to the general population (Kerala State Planning Board, 2017). Addressing these challenges requires sustained public health efforts, strategic communication, and targeted interventions to ensure equitable healthcare access for all.

Adoption of Health Communication Strategies by the Government of Kerala

Kerala's healthcare system is supported by an extensive network of healthcare facilities, particularly Public Health Centres (PHCs), which play a vital role in community healthcare at the grassroots level. The state's high literacy rate has significantly contributed to better information dissemination, increasing public awareness, vigilance, and responsiveness. This has led to strong community participation in health campaigns, particularly among the youth. The foundation of Kerala's healthcare success lies in its highly skilled medical personnel, who possess extensive experience in handling infectious diseases and work with a strong sense of coordination. Their efficiency extends beyond case identification, reporting, and clinical management to include monitoring, supervision, and grievance resolution.

A key aspect of this system is the network of Accredited Social Health Activists (ASHAs) under the National Health Mission, along with Anganwadi workers from the Integrated Child Development Services (ICDS). These workers actively iden-

tify and address emerging health issues in the community. Recognizing the need for structured health communication, the Kerala Health and Family Welfare Department issued a directive on December 20, 2021, emphasizing the importance of a well-defined communication strategy. This strategy aims to enhance public engagement in disease prevention and control measures, ultimately working toward a healthier Kerala.

Under the Nava Kerala Karma Nidhi initiative, the directive proposes the following interventions:

- 1. Major hospitals should maintain clear and standardized hoardings at key locations while removing outdated or cluttered ones.
- 2. At least one interactive hoarding in major health institutions should creatively highlight a specific theme every month or quarter.
- 3. Health awareness campaigns should be conducted in outpatient clinics and congregation areas.
- 4. All hospital compound walls must be well-maintained and free of clutter.

Multiple government agencies, including Local Self-Government Departments (LSGDs), the public distribution system, police, disaster management, education, IT, media, and fire force departments, played crucial roles in ensuring both medical and non-medical support. These agencies were instrumental in enforcing measures such as social distancing and quarantine while also supporting COVID-19 control efforts through financial aid and public awareness campaigns. The extensive reach of social media significantly contributed to the success of various initiatives, while mainstream media provided oversight by analyzing administrative data, incorporating expert opinions and ensuring government accountability.

Enhancing Accessibility in Health Communication

To effectively reach a diverse audience, health communication must leverage global, national, and local channels. People tend to trust information from familiar or local sources, making coordination with partner organizations and agencies essential for consistency and clarity. Expanding outreach through non-traditional channels can further improve engagement. Key messages should be

strategically placed across multiple platforms to reinforce their impact, with emphasis on highly visible spaces for the target audience.

Visual elements play a crucial role in capturing attention before the message itself. Strong visuals can make complex health issues feel more relatable, inspiring people to seek more information. It is equally important to ensure that individuals with disabilities can access and utilize health communication materials.

Since health communication often targets non-expert audiences from different demographic backgrounds, messages must be clear, concise, and easy to understand. If individuals must reread a message multiple times to grasp its meaning, it fails in its purpose. For example, in Kerala, people are more familiar with the term Corona than COVID-19, and very few recognize SARS-CoV-2, the official name of the virus. Using highly technical terms can alienate the audience, making the information less effective. Therefore, communicators must simplify complex medical information into clear, relatable messages that resonate with the public. Adopting the principle of "using words that work" ensures that messages are both accessible and impactful.

Making Health Communication More Actionable

Awareness alone does not always translate into immediate behavioral change. According to communication theories, people rarely follow complex health guidelines after hearing them just once. Instead, step-by-step communication campaigns can gradually influence behavior by guiding individuals toward the desired action.

Health messages should be simple, easy to recall, and widely shared to accommodate diverse socio-cultural and educational backgrounds. Effective communication must foster engagement at both the personal and community levels, creating a sense of urgency that encourages immediate action. Also, identifying trusted sources of information - such as healthcare professionals, community leaders, and reputable institutions - enhances the credibility of the message.

Timeliness is another crucial factor in actionable health communication. Regular updates through reliable communication channels help prevent the spread of misinformation. Delayed messaging can create an information vacuum, allow-

ing unreliable sources to dominate the discourse. Ensuring consistent and authoritative communication keeps the public informed and motivated to take necessary health actions.

Understanding the Audience

Effective health communication begins with a deep understanding of the target audience and the stakeholders who influence them. People's perceptions and acceptance of health messages are shaped by various factors, including age, gender, income, education, region, religion, cultural background, and social structure. Recognizing how these characteristics influence behavior allows communicators to design engaging and impactful messages that resonate with individuals and communities.

To strengthen the connection between the audience and the health issue, communicators should design messages that:

- Reflect prior experiences of the target audience
- Highlight the impact of the issue on individuals similar to the recipients
- Emphasize effects on family and friends, increasing personal relevance
- Instill confidence in taking preventive or corrective measures
- Promote the benefits of adopting positive health behaviors

By aligning messages with the audience's lived experiences and values, communicators can foster greater engagement, trust, and action.

The Role of Health Communication in COVID-19

The COVID-19 pandemic underscored the critical importance of strategic health communication worldwide. Campaigns successfully promoted social distancing, vaccination, and booster coverage, helping curb the spread of the virus. However, alongside the pandemic, an infodemic - an overwhelming surge of misleading or false information - flooded both digital and physical spaces, reinforcing the urgent need for effective health communication strategies (WHO, 2020).

In times of uncertainty, clear and strategic communication is essential to maintaining public confidence in health authorities and recommended precautions

(Paek & Hove, 2020). Public health officials and political leaders had to convey risks and uncertainties while reassuring the public that proactive measures were in place to protect them. Even before vaccines or treatments were available, strategic communication played a vital role in informing people about the virus and promoting preventive behaviors.

Once vaccines became available, persuasive communication efforts were necessary to encourage uptake. Tracking and addressing misinformation was a key priority, achieved through multi-source listening, storytelling, strategic partnerships, and well-planned dissemination. By using these health communication principles, authorities were able to counteract rumors, provide factual health information, and encourage informed decision-making among targeted populations.

Conclusion

Health communication strategies grounded in theoretical frameworks can be effectively applied in both emergency and non-emergency situations. In times of rapidly evolving public health challenges, such as COVID-19 or Nipah virus outbreaks, the primary goal of health communication should be to deliver accurate, timely information that helps individuals make informed decisions for themselves and their families. Lessons learned from past health crises should be leveraged to enhance future communication efforts, addressing a wide range of public health concerns. These may include both communicable and non-communicable diseases, such as mental health issues, the challenges of aging populations, and ensuring accessible, affordable healthcare for vulnerable groups.

There is no universal approach to health communication. Each public health challenge requires a customized strategy, employing specific methods, channels, and messaging techniques to achieve the desired health outcomes. The first step in designing an effective health communication strategy is understanding the audience and the context. Once this is established, communication efforts should be incorporated into the planning phase with a clear focus on the intended objectives. Key questions to guide this process include:

- 1. What public health issue needs to be addressed?
- 2. Who is most affected, and what are the root causes?

- 3. How can communication help to solve the issue?
- 4. What knowledge, attitudes, and behaviors currently exist among stakeholders?
- 5. Where do people seek information, and who do they trust?
- 6. What messages, messengers, channels, formats, and languages are most effective?

Health communication must be evidence-based, tailored to the needs and preferences of specific stakeholder groups, and rigorously tested to maximize effectiveness. Continuous evaluation and assessment are also essential to ensure ongoing learning, adaptation, and improvement in communication efforts.

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References

- Ajzen, I., & Fishbein, M. (1980). *Understanding attitudes and predicting social behavior*. Prentice-Hall. https://ci.nii.ac.jp/ncid/BA21965086
- Becker, M. H., Maiman, L. A., Kirscht, J. P., Haefner, D. P., & Drachman, R. H. (1977). The Health Belief Model and Prediction of Dietary Compliance: A Field Experiment. *Journal of Health and Social Behavior*, 18(4), 348–366. JSTOR. https://doi.org/10.2307/2955344
- Bernhardt, J. M. (2004). Communication at the Core of Effective Public Health. *Ameri can Journal of Public Health*, *94*(12), 2051–2053. https://doi.org/10.2105/AJPH.94. 12.2051

- Centers for Disease Control and Prevention 5. & National Center for Health Statistics. (2010). *Healthy People 2010*. https://www.cdc.gov/nchs/healthy_people/hp2010. htm
- Dutta, M. J., Kaur-Gill, S., & Tan, N. (2017). *Cultivation in Health and Risk Messaging*. https://doi.org/10.1093/acrefore/9780190228613.013.289
- Freimuth, V., Cole, G., & Kirby, S. D. (2001). Issues in evaluating mass-media health communication campaigns. *WHO Reg. Publ. Eur. Ser.*, *92*, 475–492.
- Freimuth, V. S., & Quinn, S. C. (2004). The Contributions of Health Communication to Eliminating Health Disparities. *American Journal of Public Health*, *94*(12), 2053–2055. https://doi.org/10.2105/AJPH.94.12.2053
- Garfin, D., Silver, R., & Holman, A. (2020). The Novel Coronavirus (COVID-2019) Outbreak: Amplification of Public Health Consequences by Media Exposure. *Health Psychology*, 39. https://doi.org/10.1037/hea0000875
- Hesse, B. W., Nelson, D. E., Kreps, G. L., Croyle, R. T., Arora, N. K., Rimer, B. K., & Viswanath, K. (2005). Trust and Sources of Health Information: The Impact of the Internet and Its Implications for Health Care Providers: Findings From the First Health Information National Trends Survey. *Archives of Internal Medicine*, 165(22), 2618–2624. https://doi.org/10.1001/archinte.165.22.2618
- Institute of Medicine. (2004). *Health Literacy: A Prescription to End Confusion*. The National Academies Press. https://doi.org/10.17226/10883
- Ishikawa, H., & Kiuchi, T. (2010). Health literacy and health communication. *Bio Psycho Social Medicine*, 4(1), 18. https://doi.org/10.1186/1751-0759-4-18
- Kreps, G. L. (1988). Relational communication in health care. *Southern Speech Communication Journal*, *53*(4), 344–359. https://doi.org/10.1080/10417948809372736
- Kreps, G. L., & Neuhauser, L. (2015). 1—Designing health information programs to promote the health and well-being of vulnerable populations: The benefits of evidence-based strategic health communication. In C. Arnott Smith & A. Keselman (Eds.), *Meeting Health Information Needs Outside Of Healthcare* (pp. 3–17). Chandos Publishing. https://doi.org/10.1016/B978-0-08-100248-3.00001-9
- Kreps, G. L., & Thornton, B. C. (1984). *Health communication, theory and practice*. Longman.

- Mathias, E. G., Dhyani, V. S., Krishnan, J. B., Rani, U., Gudi, N., & Pattanshetty, S. (2023). Community based health literacy interventions in India: A scoping review. *Clinical Epidemiology and Global Health*, 22. https://doi.org/10.1016/j.cegh.2023.101310
- McGuire, W. (1999). *Constructing Social Psychology: Creative and Critical Aspects*. Cam bridge University Press; Cambridge Core. https://doi.org/10.1017/CBO9780511571 206
- National Cancer Institute (U.S.) (Ed.). (2001). *Making health communication programs work* (cdc:24017). https://stacks.cdc.gov/view/cdc/24017
- National Health Authority, Government of India. (n.d.). *CoWIN Dashboard* [Dataset]. https://dashboard.cowin.gov.in/
- State Planning Board , Government of Kerala. (2017). Health and Sanitation- Medical and Public Health. In *Economic Review 2017*. https://spb.kerala.gov.in/economic-review/ER2017/web_e/ch421.php?id=41&ch=421
- Tulane University School of Public Health and Tropical Medicine. (2020). 10 Strategies for Effective Health Communication. https://publichealth.tulane.edu/blog/health-communication-effective-strategies/

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