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**Checklist for Designing Information Programmes:**

1. *Carry out formative research to understand existing attitudes, beliefs knowledge and behaviours. To assist the development of approaches,* research should be undertaken by skilled formative researchers (i.e. run focus groups and surveys).
2. *Understand the audience.*  The extent to which a message is attended to, comprehended and used by an audience is largely determined by the extent to which the messenger understands the audience. Detailed profiles of an audience need to be established as a preliminary to media development if a message is to be optimally received.
3. *Communicators and agencies need to be fully and continuously briefed about the topic being communicated and any changes occur during an outbreak.*
4. *Use skilled creative personnel to develop possible interventions and message strategies.* Determining and executing that message in a way that is optimally received and acted upon by a target audience is a highly skilled process. Pre-testing and evaluated during exposure should also be incorporated.
5. *Target the message.* Different sub-groups have different needs, interests, beliefs and attitudes. Hence, different messages – or at least different message executions should be tailored for different groups.
6. *Take account of interpersonal and peer influences.* Campaigns should attempt to stimulate interpersonal contact such as the promotion of group and community activities, and the activation of interpersonal communication networks.
7. *Maximise contact with the message*. Concentrated bursts of spot messages often work better than the same quantity of messages over a long period. Maximising contact also means optimising media within the constraints of available budgets. On-going campaigns are necessary to maintain awareness and to reinforce attitude behaviour change.
8. *Use multiple channels.* Multiple communication channels (i.e. different media and digital media vehicles plus various non-media channels) tend to have a synergistic effect and can carry different types of information.
9. *Set a realistic duration for the campaign.* Many campaigns have not matched the duration with the desired outcome. Longer campaigns are required to achieve more complex or substantial shifts in attitudes and beliefs, whereas shorter campaigns may be sufficient for changes in awareness and understanding.

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1. *Build trust: Use a credible source or spokesperson.* Source credibility is a major factor affecting message acceptance. Spokespersons should be selected based on research results that indicate that they will be credible to the target audience. Pre and on-going testing for credibility is essential.
2. *Do not confuse logic and emotion.* A basic distinction should be drawn between rational and emotional messages in health. A clear rational and if possible evidence and target audience research should be used to devise and select the focus of communications.
3. *Set realistic goals.* Major shifts in attitude and belief are not common in large populations over short periods. Hence it is important that intermediate goals are set. Realistic immediate small changes in attitude, beliefs and knowledge can be used to track progress over time.
4. *Provide environmental supports for change.* Research has shown consistently that most media campaigns require ‘on-the-ground’ back-up support for optimum effect. To accomplish this, media and social media should be accompanied by strategies associated with community organisations and opportunities for face to face interaction.
5. *Confirm that an information campaign is justifiable.* If an information campaign is justifiable and viable this should be determined early on following the formative research phase. Mass media should be looked at in terms of costs and benefits and these should be compared with other information strategies. If an alternative strategy is projected to be slightly less successful but at much less cost, the goals of a campaign may need to be re-examined.