



INTRODUCTION

Nelson Mandela once said, “Health cannot be a question of income; it is a fundamental human right.” However, countless studies have shown that health outcomes are inexorably tied to extrinsic factors that are often outside the control of the individual. These social determinants of health remain a focus of public health researchers and practitioners as solutions to modern health inequalities are sought. Recent technological advancements have allowed municipalities and public health advocacy groups to visually represent health opportunities and health inequities geographically through Opportunity Mapping.

To this end, The Flint Hills Wellness Coalition (FHWC) developed the Riley County Opportunity Map. This interactive tool displays index scores (0 to 100) for 28 health indicators across 6 domains geographically, by census tract, for Riley County, Kansas. Comparisons can be drawn between tracts, and community stakeholders can identify opportunities and barriers that will inform community organizing efforts, public policy, and systemic change initiatives.

However, what good is a tool if no one knows it exists? Given the obstacles and limitations caused by the pandemic, the FHWC Riley County Opportunity Map Communication Team found themselves in an interesting predicament: How to distribute and, more importantly, educate stakeholders about the newly released Riley County Opportunity Map?

OBJECTIVE

To develop a comprehensive communication plan for the Riley County Opportunity Map.

MATERIALS AND METHODS

Drawing on various public health and health communication methodologies and utilizing various communication technologies, both synchronous and asynchronous, the team developed a comprehensive communication plan that allowed dissemination of and education about the Riley County Opportunity Map. Use of the risk perception attitude framework was particularly helpful in message crafting and an understanding of the negative state relief model of cognitive information processing further informed motive objectives. Development of social media posts and presentation aides (i.e. PowerPoints) was guided by current health communication best practices that prioritize a simplified user experience and interactive opportunities for information seeking.

RESULTS

The Riley County Opportunity Map was launched towards the conclusion of this project and is currently being utilized within target communities. Several virtual training sessions were conducted. Specific groups that have received training to-date include: Board of Directors of The Flint Hills Wellness Coalition, Leadership Studies Symposium Series at Kansas Sate University , and The Comprehensive Public Health Group at Kansas State University College of Veterinary Medicine.

*The following figures are examples of PowerPoint slides and social media teasers utilized as part of the Riley County Opportunity Map communication campaign. *

Figure 1. PowerPoint slide describing the Riley County Opportunity Map

What is the Opportunity Map?

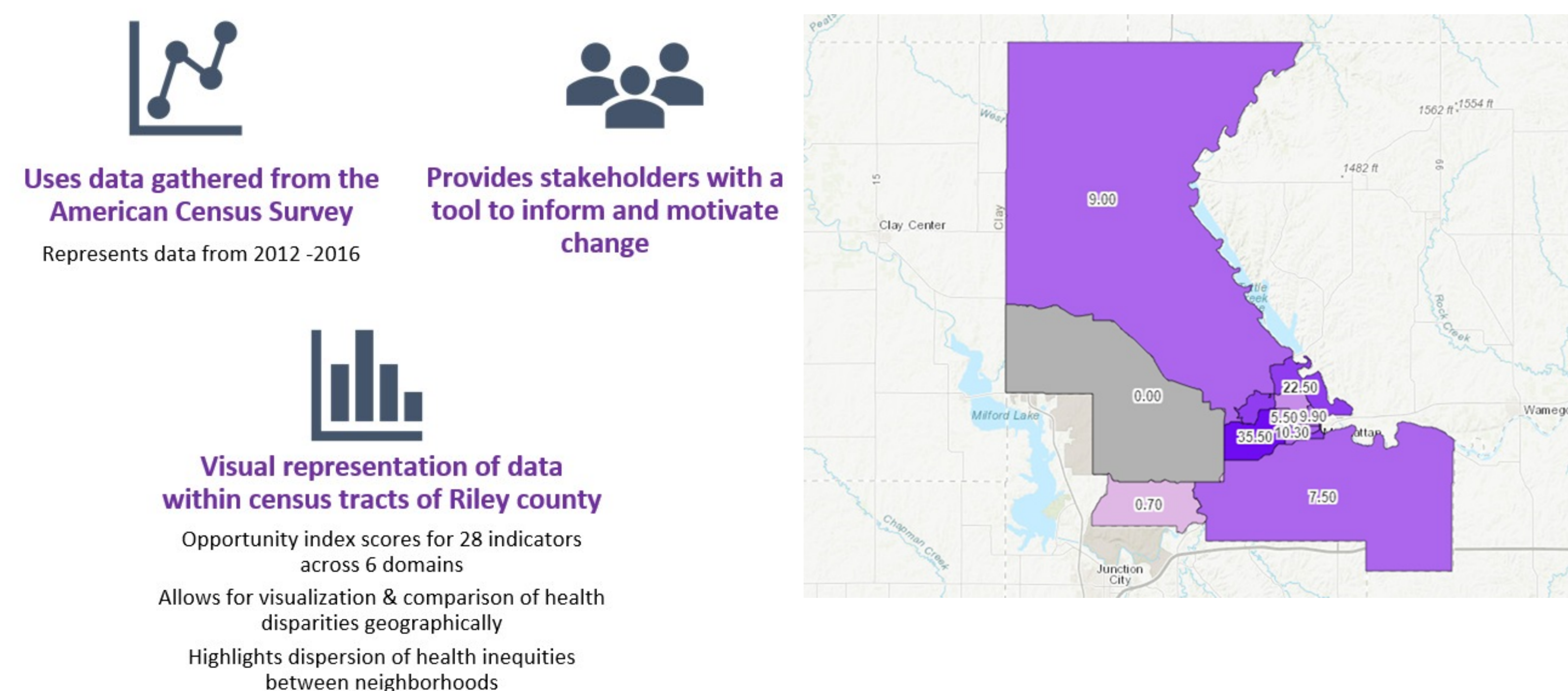


Figure 2. PowerPoint slide describing an opportunity index and domains included within the Riley County Opportunity Map.

What is an Opportunity Index?

- Opportunity Indexes provide a metric to measure health opportunity
 - Standardized to scale of 0 to 100 (least to greatest)
- Provides an aggregate score of indicators across 6 domains including:
 - Vulnerable populations (i.e. Race & Ethnicity, Linguistic Isolation, Age, etc.)
 - Economy (i.e. Poverty, MHI, Internet access, Transportation costs, etc.)
 - Food access (i.e. WIC enrollment, SNAP enrollment, Food desert)
 - Education (i.e. Preschool enrollment, Higher Education)
 - Community Connection (i.e. Mean of transport to work, veteran status, etc.)
 - Health (i.e. LEB, LBW, Uninsured, Opioid abuse, suicide rate)
- These domains reflect the multi-dimensional nature of health outcomes and health opportunity.



Figure 3. Example of social media teaser published on Facebook and Instagram during soft launch of Riley County Opportunity Map.



DISCUSSION

The ability to disseminate and effectively communicate relevant public health information is paramount in today’s world. The ability of Kansas public health practitioners to develop and implement comprehensive communication plans that strategically target stakeholders and provoke meaningful action is an inroad to real change.

Communication plans must consider the preferences, in terms of technology or platforms, and learning styles of target audiences.

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