

MEJO/HBEH 825 Seminar in Interdisciplinary Health Communication
Spring 2022

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Meeting Time: Wednesdays 9:30am-12:15pm

Classes will be in-person meetings will be in 338 Carroll Hall. If you do not feel well or need to miss class, all classes will be recorded and posted to Sakai shortly after the class ends.

Office Hours: Wednesdays 12:40-2pm, Fridays 12:20-1pm and 2-3pm

Meetings are available in 20-min blocks. Take as many as you like. You can sign up here: <https://outlook.office365.com/owa/calendar/Officehours9@admin.live.unc.edu/bookings/>
Office hours will be in-person by default. Happy to switch to Zoom if you would like; just let me know so I don't miss you.

Course Overview: In this graduate seminar, we will explore how communication can influence human behavior and public policy in ways that can improve health and well-being. We will focus on theory- and evidence-based approaches to 1) understand the influences of communication on health behavior and 2) design effective communication. This course is designed to serve both students trained in communication interested in health issues and students focused on public health who wish to have a stronger background in health communication theory and methods.

Throughout the course, students will have the opportunity to explore these objectives:

1. Appreciate the complexity of communicating about health behaviors through identification of cognitive, emotional, environmental, social, and other factors
2. Map how communication and persuasion may (may not, or may negatively) influence cognitive, emotional, and behavioral predictors for health behavior or health decision making
3. Merge theory and evidence from multiple disciplines to create an interdisciplinary argument to solve a health communication problem
4. Identify influence of mass communication, digital communication, and emerging technology on health behavior – both good and bad
5. Know appropriate methods to develop a health communication campaign to influence behavior, including steps for audience analysis, formative research, message development, and evaluating impact
6. Breakdown the necessary components of effective health communication – who, when, where, what – to reach audiences
7. Critically think about when health communication plays a role (or doesn't) in conjunction with policy, interventions, and other strategies

Required Reading: See the reading list in the weekly outline. Full citations are given at the end

of the syllabus. Please read the week's reading before coming to class.

Optional Reading: We will not read this together, but many of you may be interested in the tried and true "Pink Book" from NCI – Office of Cancer Communications, National Cancer Institute (2002). *Making health communication programs work: A planner's guide*. NIH Pub. No. 02-5145. Available online at: <http://www.cancer.gov/pinkbook>

Course Work & Grading:

Assignment	Weight
Weekly assignments (8)	45%
Final paper (& presentation)	45%
Class participation	10%

Weekly assignments:

There are 8 weekly assignments: 3 ideas, health behavior / communication focus, identifying predictors of selected behavior, literature pre-cursor, literature review draft, conceptual model, methods (or recommendations if methods are not applicable), and a draft for peer review. These are opportunities to build and get feedback on your health communication project before presenting and submitting the final paper.

Final paper:

The final paper and presentation should demonstrate the culmination of the entire semester's work. This is a standard research paper suitable for a conference submission. The paper should be no longer than 5000 words (or less if norm in your subfield) and include relevant sections: introduction, theory and literature review, methods (if applicable), results (if applicable), discussion, etc. This paper is expected to be of much higher quality than the weekly assignments. It needs to be clearly and concisely written and suitable as a component or full paper for a peer-review submission (journal, grant, etc.).

Many approaches for the final paper are acceptable. These include, but are not limited to: completed study, project proposal, theory extension paper, or grant proposal.

Grade scale: High pass (H), Pass (P), Low pass (L), Fail (F)

- H - The work is intellectually rigorous, shows an exceptional understanding of the material and is error free.
- P - The work illustrates a good effort at understanding the material and has few errors.
- L - The work indicates some progress toward gaining an understanding of the material and has substantial errors.
- F - The work shows little to no understanding of the assignment or was not completed in a timely manner.

Schedule: The schedule includes the main topics for each week and the reading required for the meeting. Students are expected to have completed the assigned readings before coming to class.

Note: Based on your input and our progress, I reserve the right to amend and change the syllabus, reading schedules, and assignments during the semester.

Week	Dates	Topic, Reading, & Assignments
1	1/12	<p>INTRODUCTION</p> <p>Assignment due next Wed (week 2, 1/19): 3 ideas for the health communication paper/project you would like to conduct. Clear and concise statement of the problem, why it is important to scholars, practitioners, society. 250 words (or less) per idea. Include how these ideas are related to your career/education goals.</p>
2	1/19	<p>THEORY- & EVIDENCE-BASED HEALTH COMMUNICATION</p> <p>Read: Cappella, 2006; Fishbein & Cappella, 2006 <i>Optional:</i> Synder, 2007</p> <p>Assignment due this week: 3 ideas Assignment due next Wed (week 3, 1/26): Select your health behavior/communication focus. Write a brief summary of the behavior and why it is critical to study. This can be an expansion (or potential narrowing) of one of your 3 ideas. This will eventually serve as the basis of your argument in your introduction and discussion/conclusion. Remember to keep the “health” in health communication at the forefront.</p>
3	1/26	<p>PREDICTORS OF BEHAVIOR (CHANGE)</p> <p>Read: Briñol & Petty, 2006; Gerrard et al., 2008; Abraham & Michie, 2008 <i>Optional:</i> Slater, 2006, Fishbein & Yzer, 2003</p> <p>Assignment due this week: Health behavior/communication focus Assignment due in two Wednesdays (week 5, 2/9): Identify predictors (constructs) of your health behavior that can be influenced by communication. Support your selection of key predictors (or the exclusion of some) with theoretical frameworks.</p>
4	2/2	<p>INFORMATION PROCESSING & EMOTION</p> <p>Read: Lang, 2006; Dunlop et al., 2008; Murphy et al., 2015 <i>Optional:</i> Oschatz & Marker, 2020</p> <p>Assignment due this week: None Assignment due next Wed (week 5, 2/9): Predictors for health behavior/communication</p>
5	2/9	<p>MEDIA CONTENT & INFORMATION SHARING</p> <p>Read: Southwell et al., 2019; Tan et al., 2015; Lazard, 2021 (also see behind-the-scenes PDF); Oeldorf-Hirsch et al., 2019 <i>Optional:</i> Southwell & Yzer, 2009</p> <p>Assignment due this week: Predictors for health</p>

behavior/ communication

Assignment due next Wed (week 6, 2/16): Develop topic sentences and establish the flow of your argument, incorporating constructs and theories identified.

6 2/16

HEALTH LITERACY

Read: von Wagner et al., 2009; Weiss, 2015; Mackert et al., 2013; Meppelink et al., 2015

Assignment due this week: Topic sentences and argument flow

Assignment due two Wednesdays (week 8, 3/2): Revise your literature review. Fill in support for each topic sentence with a synthesis of empirical evidence, theoretical developments, and/or identification of what is missing/still controversial for your health behavior context. Make sure to think about how the details you are adding support or challenge your argument.

An exceptional health communication literature review clearly identifies key predictors (constructs) for a health behavior that might be modifiable through communication. These selected constructs are supported and situated in theoretical frameworks that pull from many disciplines. The literature builds an argument for why these constructs are influential for behavior change (or reinforcement) through synthesized evidence. In other words, the literature builds a strong rationale for the necessity of the research and spells out the contributions of potential findings.

7 2/23

AUDIENCE SEGMENTATION

Read: Boslaugh et al., 2005; Slater et al., 2006; Hornik & Ramirez, 2006; Lisha et al., 2015; Hawkins et al., 2008

Assignment due this week: None

Assignment due next Wed (week 8, 9/30): Literature review

8

3/2

CONSULTATIONS – See schedule for individual times on Sakai

Assignment due this week: Literature review

9

3/9

FORMATIVE RESEARCH – CAMPAIGNS PART 1

Read: Brennan et al., 2017; Sutfin et al., 2019; Maddox et al., 2008; Shafer et al., 2011

Optional: Berkowitz et al., 2008 + supplement

Assignment due this week: None

Assignment due in two Wednesdays (week 11, 3/23): Develop your conceptual model to guide your health communication work. Identify key components for a simplified guide that can be applied for health

		promotion.
10	3/16	Spring break – No class
11	3/23	<p>MESSAGE EVALUATION – CAMPAIGNS PART 2</p> <p>Read: Buller et al., 2018; Smith et al., 2020; Coppola et al., 2020; Duke et al., 2015</p> <p><i>Optional:</i> Neiderdeppe, 2014</p> <p>Assignment due this week: Conceptual model</p> <p>Assignment due next Wed (week 12, 3/30): Draft your methods or recommendations if methods are not applicable.</p>
12	3/30	<p>UNINTENDED CONSEQUENCES</p> <p>Read: Cho & Salmon, 2007; Hornik et al., 2008; Iles, et al., 2017</p> <p><i>Optional:</i> Siegel et al., 2019</p> <p>Assignment due this week: Methods/ Recommendations</p> <p>Assignment due in two Wednesdays (week 14, 4/13): Prepare a draft of your final paper for an informal peer review. Put together pieces written for earlier assignments, including any revisions that help your research. You will trade and review a peer’s work in class on 4/13.</p>
13	4/6	<p>COMMUNICATION IN CONJUNCTION WITH POLICY, ETC.</p> <p>Read: Nguyen et al., 2020; Reinfurt, 2004; Pitlch-Loeb & Abramson, 2020</p> <p><i>Optional:</i> Neiderdeppe et al., 2015</p> <p>Assignment due this week: None</p> <p>Assignment due next Wed (week 14, 4/13): Peer review draft & peer review</p>
14	4/13	<p>PEER REVIEW</p> <p>Assignment due this week: Peer review draft & peer review</p> <p>Assignment due in next Wed (week 15 or 16, 4/20 or 4/27): Presentation</p>
15	4/20	<p>FINAL PRESENTATIONS – Part 1</p> <p>See schedule for individual times on Sakai</p> <p>Prepare a presentation with visuals a la the conference of your choice. No longer than 7-10 minutes. You will be timed. Questions from the audience immediately after each presentation.</p>
16	4/27	<p>FINAL PRESENTATIONS – Part 2</p> <p>See schedule for individual times on Sakai</p> <p>Final papers due – Thursday, May 5th @ 8am (final exam time)</p>

Honor Code: I expect that each student will conduct himself or herself within the guidelines of the University honor system (<http://honor.unc.edu>). All academic work should be done with the high levels of honesty and integrity that this University demands. You are expected to produce your own work in this class. If you have any questions about your responsibility or your instructor's responsibility as a faculty member under the Honor Code, please see the course instructor or Senior Associate Dean Charlie Tuggle, or you may speak with a representative of the Student Attorney Office or the Office of the Dean of Students.

Seeking Help: If you need individual assistance, it's your responsibility to meet with the instructor. If you are serious about wanting to improve your performance in the course, the time to seek help is as soon as you are aware of the problem – whether the problem is difficulty with course material, a disability, or an illness.

Diversity and Inclusion: I strive to make this classroom an inclusive space for all students. Please let me know if there is anything I can do to improve; I appreciate any suggestions. More broadly, our school has adopted diversity and inclusion [mission and vision statements](#) with accompanying goals. These complement the University policy on [prohibiting harrasment and discrimination](#). In summary, UNC is committed to providing an inclusive and welcoming environment for all members of our community and does not discriminate in offering access to its educational programs and activities on the basis of age, gender, race, color, national origin, religion, creed, disability, veteran's status, sexual orientation, gender identity, or gender expression. The Dean of Students (Suite 1106, Student Academic Services Building, CB# 5100, 450 Ridge Road, Chapel Hill, NC 27599-5100 or [919] 966-4042) has been designated to handle inquiries regarding the University's nondiscrimination policies.

Policy on Non-discrimination: The University is committed to providing an inclusive and welcoming environment for all members of our community and to ensuring that educational and employment decisions are based on individuals' abilities and qualifications. Consistent with this principle and applicable laws, the University's [Policy Statement on Non-Discrimination](#) offers access to its educational programs and activities as well as employment terms and conditions without respect to race, color, gender, national origin, age, religion, creed, genetic information, disability, veteran's status, sexual orientation, gender identity or gender expression. Such a policy ensures that only relevant factors are considered and that equitable and consistent standards of conduct and performance are applied.

If you are experiencing harassment or discrimination, you can seek assistance and file a report through the Report and Response Coordinators (see contact info at safe.unc.edu) or the [Equal Opportunity and Compliance Office](#), or online to the EOC at <https://eoc.unc.edu/report-an-incident/>.

Special Accommodations: If you require special accommodations to attend or participate in this course, please let the instructor know as soon as possible. If you need information about disabilities visit the Accessibility Services website at <https://accessibility.unc.edu/>

The University of North Carolina at Chapel Hill facilitates the implementation of reasonable accommodations, including resources and services, for students with disabilities, chronic

medical conditions, a temporary disability or pregnancy complications resulting in barriers to fully accessing University courses, programs and activities.

Accommodations are determined through the Office of Accessibility Resources and Service (ARS) for individuals with documented qualifying disabilities in accordance with applicable state and federal laws. See the ARS Website for contact information: <https://ars.unc.edu> or email ars@unc.edu. (source: <https://ars.unc.edu/faculty-staff/syllabus-statement>)

Counseling and Psychological Services: CAPS is strongly committed to addressing the mental health needs of a diverse student body through timely access to consultation and connection to clinically appropriate services, whether for short or long-term needs. Go to their website: <https://caps.unc.edu/> or visit their facilities on the third floor of the Campus Health Services building for a walk-in evaluation to learn more.

University Attendance Policy: No right or privilege exists that permits a student to be absent from any class meetings, except for these University Approved Absences:

1. Authorized University activities
2. Disability/religious observance/pregnancy, as required by law and approved by [Accessibility Resources and Service](#) and/or the [Equal Opportunity and Compliance Office](#) (EOC)
3. Significant health condition and/or personal/family emergency as approved by the [Office of the Dean of Students](#), [Gender Violence Service Coordinators](#), and/or the [Equal Opportunity and Compliance Office](#) (EOC).

Class Attendance Policy: *Instructors may work with students to meet attendance needs that do not fall within University approved absences. For situations when an absence is not University approved (e.g., a job interview or club activity), instructors determine their own approach to missed classes and make-up assessments and assignments.*

You may be absent from this course for any reason. It would be nice to know ahead of time – because I care, and you will be missed – by this is not a requirement. When it is appropriate (e.g., when you are feeling better), I will work with students individually to adjust timelines and supply materials needed to complete the learning objectives for the course.

Please be aware that you are bound by the [Honor Code](#) when making a request for a University approved absence. (source: <http://catalog.unc.edu/policies-procedures/attendance-grading-examination/>)

Title IX: Any student who is impacted by discrimination, harassment, interpersonal (relationship) violence, sexual violence, sexual exploitation, or stalking is encouraged to seek resources on campus or in the community. Reports can be made online to the EOC at <https://eoc.unc.edu/report-an-incident/>. Please contact the University's Title IX Coordinator (Elizabeth Hall, interim – titleixcoordinator@unc.edu), Report and Response Coordinators in the Equal Opportunity and Compliance Office (reportandresponse@unc.edu), Counseling and Psychological Services (confidential), or the Gender Violence Services Coordinators (gvsc@unc.edu; confidential) to discuss your specific needs. Additional resources are available at safe.unc.edu.

Accreditation: Our school's accrediting body outlines a number of values you should be aware of and competencies you should be able to demonstrate by the time you graduate from our program. Learn more about them here:

<http://www2.ku.edu/~acejmc/PROGRAM/PRINCIPLES.SHTML#vals&comps>

No single course could possibly give you all of these values and competencies; but collectively, our classes are designed to build your abilities in each of these areas. In this class, we will address a number of the values and competencies, with special emphasis on these six bullet dots under "Professional values and competencies" in the link above.

- Demonstrate an understanding of the history and role of professionals and institutions in shaping communications;
- Understand concepts and apply theories in the use and presentation of images and information;
- Think critically, creatively and independently;
- Conduct research and evaluate information by methods appropriate to the communications professions in which they work;
- Write correctly and clearly in forms and styles appropriate for the communications professions, audiences and purposes they serve;
- Apply tools and technologies appropriate for the communications professions in which they work.

Mask use: All enrolled students are required to wear a mask covering your mouth and nose at all times in our classroom. This requirement is to protect our educational community -- your classmates and me -- as we learn together. If you choose not to wear a mask, or wear it improperly, I will ask you to leave immediately, and I will submit a report to the [Office of Student Conduct](#). At that point you will be disenrolled from this course for the protection of our educational community. Students who have an authorized accommodation from Accessibility Resources and Service have an exception. For additional information, see <https://carolinatogether.unc.edu/university-guidelines-for-facemasks/>.

Citations for the Readings

- Abraham, C., & Michie, S. (2008). A taxonomy of behavior change techniques used in interventions. *Health Psychology, 27*(3), 379-387.
- Berkowitz, J. M., Huhman, M., Heitzler, C. D., Potter, L. D., Nolin, M. J., & Banspach, S. W. (2008). Overview of formative, process, and outcome evaluation methods used in the VERB™ campaign. *American Journal of Preventive Medicine, 34*(6), S222-S229.
- Boslaugh, S. E., Kreuter, M. W., Nicholson, R. A., & Naleid, K. (2005). Comparing demographic, health status and psychosocial strategies of audience segmentation to promote physical activity. *Health Education Research, 20*(4), 430-438.
- Brennan, E., Gibson, L. A., Kybert-Momjian, A., Liu, J., & Hornik, R. C. (2017). Promising themes for antismoking campaigns targeting youth and young adults. *Tobacco Regulatory Science, 3*, 29-46.
- Briñol, P. & Petty, R.E. (2006). Fundamental processes leading to attitude change: Implications for cancer prevention communications. *Journal of Communication, 56*, S81-S96.
- Buller, M. K., Andersen, P. A., Bettinghaus, E. P., Liu, X., Slater, M. D., Henry, K., ... & Buller, D. B. (2018). Randomized trial evaluating targeted photographic health communication messages in three stigmatized populations: Physically-disabled, senior, and overweight/ obese individuals. *Journal of Health Communication, 23*(10-11), 886-898.
- Cappella, J. N. (2006). Integrating message effects and behavior change theories: Organizing comments and unanswered questions. *Journal of Communication, 56*, S265-S279.
- Cho, H., & Salmon, C. T. (2006). Unintended effects of health communication campaigns. *Journal of Communication, 57*(2), 293-317.
- Coppola, V., McGlone, M., Girandola, F., & Camus, O. (2020). Persuasive Effects of Linguistic Agency Assignment and Linguistic Markers of Argumentation in Health Messages about an Emerging Sexually Transmitted Disease. *Journal of Health Communication, 25*(1), 33-42
- Duke, J. C., Alexander, T. N., Zhao, X., Delahanty, J. C., Allen, J. A., MacMonegle, A. J., & Farrelly, M. C. (2015). Youth's awareness of and reactions to the real cost national tobacco public education campaign. *PloS ONE, 10*(12), e0144827.
- Dunlop, S., Wakefield, M., & Kashima, Y. (2008). Can you feel it? Negative emotion, risk, and narrative in health communication. *Media Psychology, 11*(1), 52-75.
- Fishbein, M., & Cappella, J. N. (2006). The role of theory in developing effective health communications. *Journal of Communication, 56*, S1-S17.

- Fishbein, M., & Yzer, M. C. (2003). Using theory to design effective health behavior interventions. *Communication Theory*, 13(2), 164-183.
- Gerrard, M., Gibbons, F. X., Houlihan, A. E., Stock, M. L., & Pomery, E. A. (2008). A dual-process approach to health risk decision making: The prototype willingness model. *Developmental Review*, 28(1), 29-61.
- Hawkins, R. P., Kreuter, M., Resnicow, K., Fishbein, M., & Dijkstra, A. (2008). Understanding tailoring in communicating about health. *Health Education Research*, 23(3), 454-466.
- Hornik, R. C., & Ramirez, A. S. (2006). Racial/ethnic disparities and segmentation in communication campaigns. *American Behavioral Scientist*, 49(6), 868-884.
- Hornik, R., Jacobsohn, L., Orwin, R., Piesse, A., & Kalton, G. (2008). Effects of the national youth antidrug media campaign on youths. *American Journal of Public Health*, 98(12), 2229-2236.
- Iles, I. A., Atwell Seate, A., & Waks, L. (2017). Stigmatizing the other: An exploratory study of unintended consequences of eating disorder public service announcements. *Journal of Health Psychology*, 22(1), 120-131.
- Lang, A. (2006). Using the limited capacity model of motivated mediated message processing to design effective cancer communication messages. *Journal of Communication*, 56, S57-S80.
- Lazard, A. J. (2021). Social media message designs to educate adolescents about e-cigarettes. *Journal of Adolescent Health*. 68(1), 130-137.
- Lisha, N. E., Jordan, J. W., & Ling, P. M. (2016). Peer crowd affiliation as a segmentation tool for young adult tobacco use. *Tobacco Control*, 25, i83-i89.
- Mackert, M., Donovan, E., & Guadagno, M. (2013). Promoting multivitamins to Hispanic adolescents and mothers: Communicating benefits that resonate. *SAGE Open*, 3(4), 2158244013507268.
- Maddock, J. E., Silbanuz, A., & Reger-Nash, B. (2008). Formative research to develop a mass media campaign to increase physical activity and nutrition in a multiethnic state. *Journal of Health Communication*, 13(3), 208-215.
- Meppelink, C. S., Smit, E. G., Buurman, B. M., & van Weert, J. C. (2015). Should we be afraid of simple messages? The effects of text difficulty and illustrations in people with low or high health literacy. *Health Communication*, 30(12), 1181-1189.
- Murphy, S. T., Frank, L. B., Chatterjee, J. S., Moran, M. B., Zhao, N., Amezola de Herrera, P., & Baezconde-Garbanati, L. A. (2015). Comparing the relative efficacy of narrative vs nonnarrative health messages in reducing health disparities using a randomized trial. *American Journal of Public Health*, 105, 2117-2123.

- Nguyen, M. H., Bol, N., & Lustria, M. L. A. (2020). Perceived Active Control over Online Health Information: Underlying Mechanisms of Mode Tailoring Effects on Website Attitude and Information Recall. *Journal of Health Communication, 25*(4), 271-282.
- Niederdeppe, J. (2014). Conceptual, Empirical, and Practical Issues in Developing Valid Measures of Public Communication Campaign Exposure. *Communication Methods & Measures, 8*, 138-161.
- Niederdeppe, J., Heley, K. and Barry, C.L. (2015). Inoculation and Narrative Strategies in Competitive Framing of Three Health Policy Issues. *Journal of Communication, 65*: 838-862.
- Oeldorf-Hirsch, A., High, A. C., & Christensen, J. L. (2019). Count your calories and share them: Health benefits of sharing mHealth information on social networking sites. *Health Communication, 34*(10), 1130-1140.
- Oschatz, C., & Marker, C. (2020). Long-term Persuasive Effects in Narrative Communication Research: A Meta-Analysis. *Journal of Communication, 70*(4), 473-496.
- Piltch-Loeb, R., & Abramson, D. (2020). From information to intervention: connecting risk communication to individual health behavior and community-level health interventions during the 2016 Zika outbreak. *Journal of Risk Research, 1*-16.
- Reinfurt, D. W. (2004). Documenting the sustainability of a mature Click It or Ticket program: the North Carolina experience. *Journal of Safety Research, 35*(2), 181-188.
- Shafer, A., Cates, J. R., Diehl, S. J., & Hartmann, M. (2011). Asking mom: Formative research for an HPV vaccine campaign targeting mothers of adolescent girls. *Journal of Health Communication, 16*(9), 988-1005.
- Siegel, J. T., Flores-Medel, E., Martinez, D. A., & Berger, D. E. (2019). Can Mental Health Anti-stigma Messages Have Untoward Effects on Some People with Depression?: An Exploratory Study. *Journal of Health Communication, 24*(11), 821-828.
- Slater, M. D., Kelly, K. J., & Thackeray, R. (2006). Segmentation on a shoestring: Health audience segmentation in limited-budget and local social marketing interventions. *Health Promotion Practice, 7*, 170-173.
- Slater, M. D. (2006). Specification and misspecification of theoretical foundations and logic models for health communication campaigns. *Health Communication, 20*(2), 149-157.
- Smith, R. A., Fink, E. L., Romano, A., & M'ikanatha, N. M. (2020). Precise Persuasion: Investigating Incentive Appeals for the Promotion of Antibiotic Stewardship with Message-induced Transitions. *Journal of Health Communication, 25*(5), 430-443.

- Snyder, L. B. (2007). Health communication campaigns and their impact on behavior. *Journal of Nutrition Education and Behavior*, 39(2), S32-S40.
- Southwell, B. G., Niederdeppe, J., Cappella, J. N., Gaysynsky, A., Kelley, D. E., Oh, A., ... & Chou, W. Y. S. (2019). Misinformation as a Misunderstood Challenge to Public Health. *American Journal of Preventive Medicine*, 57(2), 282-285.
- Southwell, B. G., & Yzer, M. C. (2009). When (and why) interpersonal talk matters for campaigns. *Communication Theory*, 19(1), 1-8.
- Sutfin, E. L., Cornacchione Ross, J., Lazard, A. J., Orlan, E., Suerken, C. K., Wiseman, K. D., ... & Noar, S. M. (2019). Developing a point-of-sale health communication campaign for cigarillos and waterpipe tobacco. *Health Communication*, 34(3), 343-351.
- Tan, A. S., Lee, C. J., & Chae, J. (2015). Exposure to health (mis) information: Lagged effects on young adults' health behaviors and potential pathways. *Journal of Communication*, 65(4), 674-698.
- von Wagner, C., Steptoe, A., Wolf, M. S., & Wardle, J. (2009). Health literacy and health actions: a review and a framework from health psychology. *Health Education & Behavior*, 36(5), 860-877.
- Weiss, B. D. (2015). Health literacy research: Isn't there something better we could be doing? *Health Communication*, 30(12), 1173-1175.