Master of Public Health

Applied Practice Experience

BROADCASTING BETTER HEALTH:
HEALTH PROMOTION AND COMMUNICATION STRATEGIES AT A NONPARTISAN INSTITUTION

by

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MASTER OF PUBLIC HEALTH

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Chapter 1 - Portfolio Products

The Kansas Health Institute (KHI) is a nonprofit, nonpartisan educational organization based in Topeka, Kansas. Their work focuses on the outcomes and impact of policies, with an emphasis on research, education, and engagement, to strive for a healthier Kansas. KHI also creates space for important conversations and being a convening organization. With this value of education for the public, KHI is an excellent institution at health promotion. Health promotion is an area that is highly utilized in behavior change practices, typically in areas such as nutrition, smoking cessation, and physical activity. With my emphasis being in physical activity, focusing on how to best facilitate health promotion through health communication was the goal for my Applied Practice Experience (APE). Health communication is an important aspect of health promotion, meaning a group such as this was ideal for building skills in this area. Many of KHI's products provide information to a variety of audiences, making them an ideal group to work with to focus on health communication. While completing the APE at KHI, multiple products were produced, with only a few being discussed, including two *Health on the Plains* podcast episodes, podcast analytics, a transcription best practice guide, and one-on-one interviews that were then coded thematically to be used in a blog post. The following paragraphs will further describe the products previously listed.

Health on the Plains is a rural health podcast that holds space for nuanced conversations with guests from all over the state. These conversations include topics that range widely, based on the guests' experiences and expertise, such as aging in place, maternal health deserts, the role of rural hospital leaders, etc. This podcast amplifies rural voices and focuses on how to improve health with the tools and resources available, and showcases the knowledge and resilience of rural Kansans. There is a project team associated with the podcast, all of whom provide feedback on interview questions, film, produce and publish monthly episodes. Several of my products facilitated this project, including tracking analytics and the two episodes themselves that I helped record and produce.

Another public health area that my products fall into is accessibility. Creating a transcription and closed captions best practices resource guide increases accessibility because those working at KHI will produce better products that members of the public will benefit from. Closed captions were developed as a way to make audio or video media accessible to those who are deaf or hard of hearing. KHI is obligated to be compliant with the Americans with Disabilities Act (ADA) as a nonprofit with more than 15 employees, and ensuring the

requirements are met is of the utmost importance, as this provides the information to already underserved populations.

Lastly, I gained skills and experience in interviewing people and performing qualitative analysis. Investigating the common threads between different individuals' responses and then recommending the themes for use in a blog post was performed using a grounded theory approach. Since these interviews were conducted knowing a blog post would be the final product, grounded theory practices were not followed to the extent a research project would entail. Instead, an interview guide was developed before the interviews, then each transcript of the six interviews were coded, and overarching themes between the individuals were found. Direct quotes that could be beneficial to use in the blog post were also highlighted through each transcript. While the blog post is currently unfinished, it is expected to be published mid-2025.

Overall, I contributed to multiple teams and projects during my time at the Kansas Health Institute and gained valuable applied knowledge for the field of public health. Gaining a deeper understanding for strategic planning, discovering the different real-life tools such as interactive maps for useful educational projects, and learning how those in the field combine strengths to publish helpful products for the public were all opportunities I would not have experienced without this APE. Observing the analysts gave me valuable insight into the world of epidemiology, while attending convenings such as the Annual Insurance Update (AIU) showcased how to handle engaging with a large group of stakeholders, facilitating peaceful discussion amongst those with differing opinions. Working with both project staff and the communications team taught me interdisciplinary teamwork and how an organization operates, the importance of audience in planning a project and how it ties into the *why*, how important accessibility is, and how to pivot from a topic that is no longer viable.

Table 1.1 Summary of Portfolio Products

Portfolio Product		**Description**
1	*Health on the Plains* (*HotP*) Podcast Episodes 11 and 12 https://www.khi.org/podcast/	Two podcast episodes were fully developed from start to finish throughout the course of my internship, with the entire team providing feedback on items such as what questions to ask during the interview, who to target with the episode topics, and what the best dissemination strategy would be. I also participated in

		the filming, as well as post-production activities such as captions.
2	*HotP* Podcast Analytics + Six interviews and analyses	Throughout the APE, quantitative data was gathered through tracking analytics for the podcast that were distributed and discussed at organizational meetings, helping decide future dissemination strategies. Six interviews of current or recent graduates of MPH programs in Kansas were performed, which were then analyzed using a grounded theory approach. These themes and specific quotes will be utilized in a future blog post for the KHI website. As it was known these interviews would be used for such a purpose, not all research guidelines were adhered to, due to time restraints.
3	Best Practices Resource Guide for Closed Captions for KHI Employees	A best practice resource guide for closed captions as well as what to do in instances where information must be corrected in a video meant for public education, to be used as a reference for those working at KHI.

Table 1.2 Portfolio Products and Competency Addressed

Portfolio Product		**Number and Competency Addressed**	
1	*Health on the Plains* (*HotP*) Podcast Episodes 11 and 12 https://www.khi.org/podcast/	18, 21	Select communication strategies for different audiences and sectors, Integrate perspectives from other sectors and/or professions to promote and advance population health
2	*HotP* Podcast Analytics + Six interviews and analyses	2, 4	Select quantitative and qualitative data collection methods appropriate for a given public health context, Interpret results of data analysis for public health research, policy, or practice
3	Best Practices Resource Guide for Closed Captions for KHI Employees	16	Apply leadership and/or management principles to address a relevant issue

Chapter 2 - Competencies

Competency 2 – Select quantitative and qualitative data collection methods appropriate for a given public health context

This competency was met through the selection of using social media platform analytics (views, likes, shares, etc.) to track engagement and reach for podcast episodes as a quantitative measure, as well as deciding to conduct six individual interviews with current or recent graduates of MPH programs in Kansas for qualitative data. To collect quantitative data, organizational accounts on social media sites such as Facebook, LinkedIn, Instagram, etc., track how many people interact with each post, and how. Every month, this information is compiled into a document to discuss the different approaches or dissemination strategies used, and how successful each was. Choosing to track these analytics allows for organizations such as KHI and those working in the field of public health to have somewhat of a gauge to see what dissemination strategies work better than others, as well as what topics most interest their current audience. Plus, it is provided freely with the use of these platforms, so it is a cost-effective method as well.

For the qualitative data collection, choosing to do separate interviews instead of a focus group was suggested by the site preceptor due to the depth of information needed about individual experiences and perspectives on current higher education practices for public health. It was also more conducive to achieving these in a shorter span of time, as trying to find a time that would work for all six individuals, located across several states, would have been far more difficult. Since group dynamics were not a part of the interest in observing, this was the more feasible approach to gain qualitative information to be used in a blog post.

As such, after an interview guide was agreed upon by Kevin Kovach, the six interviews were conducted over Zoom or Teams, depending on which worked better for each guest. Each interview was recorded with permission from the guests, then later transcripts were downloaded through whichever software was utilized. A guided theory approach was then used on said transcripts and coded for specific topics, with recurring themes found throughout all six.

Competency 4 – Interpret results of data analysis for public health research, policy or practice

Like the competency above, this competency was met through the quantitative podcast analytics and qualitative interview transcripts. This competency was taking the step above and finding the results. Interpreting the analytics led to discussions during project meetings over what dissemination methods were more effective than others, what topics most interested

current listeners, and what platforms had the best audience reach. At each meeting I would present the information to staff and provide my interpretations of them to the group. Examples of such interpretations include: (1) LinkedIn is the most successful social media platform for audience reach and engagement, (2) Audiences listen most often through YouTube, and (3) at least two posts on other social media such as Facebook and X (formerly known as Twitter) combine into a similar reach as LinkedIn alone.

Interpretations such as the ones above led to discussion on what dissemination strategies should be used in the future, and if more social media posts should be incorporated into the social media platforms such as Facebook and X. Next steps are for the organization to decide what dissemination strategies work best for their audiences and goals.

Qualitative analysis is its own research science, and a grounded theory approach was used. Once all interviews were completed, familiarization of the data occurred, which then led to an emergence of patterns. No theoretical framework or preconceived themes were used since this is an inductive approach. After this, coding of these patterns occurred, leading to overall themes. While not all guidelines were adhered to, such as multiple coders or iteration to the extent research expects, due to time restraints and it being known these interviews would be used for a blog post, interpretation was still a key aspect of finding the themes throughout all six interviews. Specific quotes were also highlighted that would help emphasis the author's point of view in the blog post.

Codes such as previous public health experience, public health education being unpopular or not well-known, current position and duties associated with it, importance in being multifaceted professionals, applied experience being just as important as education, increasing public health connections, and more were used throughout each interview transcript. As these codes were found throughout each transcript, they became some of the overall themes.

The next step after these themes were found was to develop the blog post. This meant going back through each transcript, reviewing the themes, and choosing the overall topic. Once this was achieved, the topic for the blog post was decided: increasing connections in public health and public health education. As this began during the APE, but was pushed to the side for other tasks and blog posts, it remains unfulfilled during the Spring of 2025. Once more, if an interest in the organization is piqued, a more rigorous practice can be undertaken to disclose findings to universities within Kansas in the future. Currently, the blog post is unfinished, but is scheduled to be published mid-2025.

Competency 16 - Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making

Guiding decision making and empowering others working for the Kansas Health Institute was precisely the goal of the Best Practices Resource Guide for Closed Captions for KHI Employees. As an institute that provides multiple forms of media every month that becomes widely available, many questions arose over what the correct strategies and practices for closed captioning issues were. Knowing that more than one issue would occur, developing a resource guide to help empower the communications team members and foster collaboration with the project staff was an important aspect of this product. Deciding what to do when errors arise can be difficult, and this tool describes multiple different scenarios that may occur, as well as links to a variety of resources that also tackle these problems, in case of one that is not included already.

Competency 18 - Select communication strategies for different audiences and sectors

Health on the Plains is a rural health focused podcast that covers a wide spectrum of topics, depending on the experience and expertise of the guests for each episode. With each episode, the interprofessional team works together to decide who the target audience is, the best dissemination channels and strategies, and any variation from the norm that will occur. The team collaborates in meetings both before the episode is filmed and after the episode is produced. As a member of the podcast team, I provided my own insights and feedback on who to target, how to distribute the episode, etc., during these meetings. Examples of these insights include: (1) wanting to target specific audiences such as medical students due to the *HotP* episodes I helped film including a doctor as the guest, and (2) agreeing to experiment with the structure of episodes by splitting this interview into two parts so that analytics could be tracked on audience reaction.

Competency 21 - Perform effectively on interprofessional teams

Like competency 18, this was met through the development and act of working on the *HotP* podcast project team. As previously mentioned, there are three project staff members who focus on topics, questions, recording (if traveling), and hosting the podcast. This includes the host of the podcast who is the project director, the CEO of KHI, and another analyst. The host and project director comes up with a list of topics and possible guests, as well as interview questions once a guest is approved. The CEO of KHI is part of the strategic dissemination process and provides input on what audience to send information to. This analyst is a

secondary figure in the podcast and was the role that I stepped into over the duration of my APE. Their role is to help film episodes, provide thoughts during team meetings over dissemination, topics, etc., and sometimes does closed captioning.

There are four communication team members who focus on producing the end products (full episodes, webpage, social media posts, etc.) and providing feedback on targeting and dissemination strategies. The Director of Strategic Communication and Engagement provides a managerial role similar to the CEO, in the approval process. A graphic designer works to produce the episodes and make any additional materials necessary. The digital communications specialist schedules all posting on platforms. A publication specialist reviews each product ensuring high-quality results. Each member also can attend the team meetings and provide input on best dissemination practices, thoughts on topics, etc.

Working with all these individuals combined into the project team meetings gave wonderful insights and opportunities to learn, as well as chances to voice my own feedback. As described in previous competencies, my role was to provide insight into guest choices, dissemination strategies, discuss question choices, help film, produce closed captioning, and shoot b-roll footage and pictures. Working closely with the host, I helped develop project management tools through the new software systems, decide on questions, and engage in the team meetings. The graphic designer and I worked together through filming, as they covered the main footage while I took care of b-roll and trailer video footage. With the digital communication specialist, we planned social media posts and discussed what analytics meant for dissemination strategies. Altogether, collaboration is how the podcast can be possible.

Table 2.1 Summary of MPH Foundational Competencies

Number and Competency		**Description**
2	Select quantitative and qualitative data collection methods appropriate for a given public health context	Analytics provide quantitative feedback for audience reach and dissemination strategies used without extra work, since most social media provide that with an organizational account. Interviews were conducted because they provide rich context which is important to ensure someone is not writing from only their perspective while speaking for a group in a blog post.
4	Interpret results of data analysis for public health research, policy or practice	Analytics provide numbers for audience reach and how effective the dissemination strategies used were, while were analyzed using a grounded theory approach. However, it is important to note that the final product was known from the start, so strict adherence to the research framework was not condoned due to time restraints.

16	Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making	Building a transcription and closed captioning resource guide for other KHI team members empowers others and helps guide decision making on these topics at a later point in time.
18	Select communication strategies for different audiences and sectors	Since rural individuals can be difficult to reach, but so many people now own phones, podcasts are a new communication strategy to reach these target audiences. Sending information through established email chains and to those who have affirmed interest in this area helps get the information to those who want it or need it most.
21	Perform effectively on interprofessional teams	All areas of KHI work require teamwork and interprofessional communication, but the podcast episodes highlight this most effectively. Project staff are those who design questions, host the podcast and perform the interview, while the communication team produce the product and provide helpful input on dissemination strategy.

Table 2.2 MPH Foundational Competencies Course Mapping

22 Public Health Foundational Competencies Course Mapping	MPH 701	MPH 720	MPH 754	MPH 802	MPH 818
Evidence-based Approaches to Public Health					
1. Apply epidemiological methods to the breadth of settings and situations in public health practice	x		x		
2. Select quantitative and qualitative data collection methods appropriate for a given public health context	x	x	x		
3. Analyze quantitative and qualitative data using biostatistics, informatics, computer-based programming and software, as appropriate	x	x	x		
4. Interpret results of data analysis for public health research, policy or practice	x		x		
Public Health and Health Care Systems					
5. Compare the organization, structure and function of health care, public health and regulatory systems across national and international settings		x			
6. Discuss the means by which structural bias, social inequities and racism undermine health and create challenges to achieving health equity at organizational, community and societal levels					x
Planning and Management to Promote Health					
7. Assess population needs, assets and capacities that affect communities' health		x		x	

8. Apply awareness of cultural values and practices to the design or implementation of public health policies or programs					x
9. Design a population-based policy, program, project or intervention			x		
10. Explain basic principles and tools of budget and resource management		x	x		
11. Select methods to evaluate public health programs	x	x	x		
Policy in Public Health					
12. Discuss multiple dimensions of the policy-making process, including the roles of ethics and evidence		x	x	x	
13. Propose strategies to identify stakeholders and build coalitions and partnerships for influencing public health outcomes		x		x	x
14. Advocate for political, social or economic policies and programs that will improve health in diverse populations		x			x
15. Evaluate policies for their impact on public health and health equity		x		x	
Leadership					
16. Apply principles of leadership, governance and management, which include creating a vision, empowering others, fostering collaboration and guiding decision making		x			x
17. Apply negotiation and mediation skills to address organizational or community challenges		x			
Communication					
18. Select communication strategies for different audiences and sectors	DMP 815, FNDH 880 or KIN 796				
19. Communicate audience-appropriate public health content, both in writing and through oral presentation	DMP 815, FNDH 880 or KIN 796				
20. Describe the importance of cultural competence in communicating public health content		x			x
Interprofessional Practice					
21. Perform effectively on interprofessional teams		x			x
Systems Thinking					
22. Apply systems thinking tools to a public health issue			x	x	

Table 2.3 Application of Systems Thinking Tools to a Public Health Issue

Report on the use of the Systems Thinking Tool(s) you selected at the beginning of your APE in the table below. Describe why you selected this tool for your APE, how you were able to apply this tool, or how it could be applied to a specific situation or public health issue encountered during your APE. Please include an appropriate diagram for the tool where appropriate, for example a causal loop diagram (CLD) if you applied the CLD tool.

Use of Systems Thinking Tools

Systems Thinking Tool	Description of Use
Process Mapping	Process mapping was the best systems thinking tool to apply to the process of recording a rural health podcast episode, because it is a task that repeats throughout the job. It helped clarify during my APE the current processes in place for how a podcast episode is recorded, and can then be used to help decide where changes could be made. You can see as you go through the flowchart the process that occurs for the person who is recording the podcast episode, and what is involved. Analysis may occur from the Project Manager, to see what a redesign could help improve. It also helps to show where issues may arise.

Process mapping is a systems thinking tool that represents the steps in a process and how well said process flows. This is very useful for something that is a recurring task such as recording podcast episodes while traveling. The diagram designed (see Figure 2.1) begins with ensuring equipment is on and recording, and what to do for a yes or no response. Then it follows the path of the individual recording the episode, as they would also need to be gathering b-roll footage (secondary footage used to add context or enhance audience understanding in some way to the main footage) to be used in the edited recording. If that was prevented for some reason, b-roll using images and other options online is performed. Once all of this is achieved, there should be enough material for the communication team to fully develop the podcast episode.

This process allows for the project director to see where bottlenecks typically occur, as well as where problems can arise such as forgetting to charge technology, forgetting a specific tool, or a limited amount of b-roll footage being filmed. Knowing this, preventative measures can be put into place to ensure that recording still occurs smoothly.

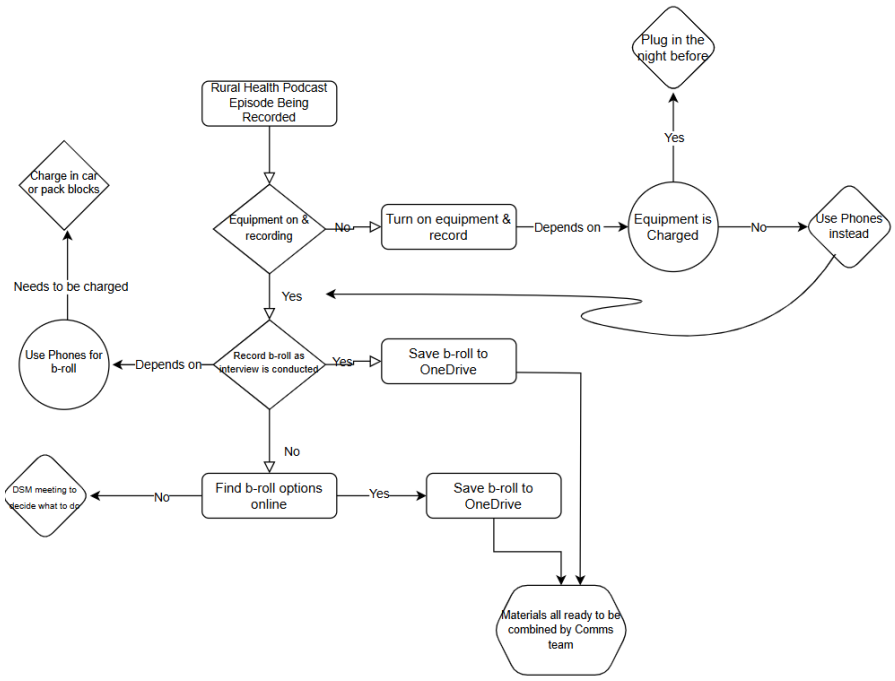

Figure 2.1 - Process Mapping of a Podcast Episode