

La source canadienne de renseignements sur le VIH et l'hépatite C

Media Literacy Workshop Report

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1 Background

In 2011 CATIE began work on a four-year Ethnocultural Hepatitis C Outreach and Social Marketing project as part of the Ontario Ministry of Health and Long-term Care's Hepatitis C strategy to increase awareness of hepatitis C, reduce stigma, promote equal access to health services including testing, and create effective partnerships within communities.

The project has produced in-language (English, Punjabi, Simplified Chinese, Urdu and Tagalog) hepatitis C resources including a website, pamphlets and educational curriculum as well as a media campaign in print, radio and online. Advisory Councils were formed for each community, four in total, to inform the development of the media campaign, educational curriculum, and information resources.

Educational Curriculum and delivery

As part of the project, CATIE developed and delivered Media Literacy workshops in 4 languages. These workshops introduced the participants to some historic advertising campaigns promoting consumer and healthcare products. A discussion of these campaigns helped to acclimatize the group to the psychology of marketing and to increase their media and marketing literacy. The workshops also provided the opportunity for participants to share the media channels through which they typically receive healthcare news and information, running the gamut from traditional print and online news sources to community-based knowledge sharing from, for example, a neighbor or religious leader.

The session afforded critical discussion and self-reflection. Participants were given the opportunity to do some critical thinking around their trusted sources of information and share the resources that they depend on in their day-to-day lives.

Participant feedback about <u>trusted</u> media sources and about their own sensibility toward media messaging helped to inform the development of informational resources that were used in subsequent hepatitis C workshops, as well as the media campaign CATIE would develop to raise awareness about hepatitis C in various ethnocultural communities.

Workshop Outline

Facilitator and CATIE Introduction (5 minutes)
Group Introductions (5 minutes)
Setting Ground rules for the workshop (10 minutes)
Brainstorm: defining media and media literacy (10 minutes)
The 5 main concepts of media literacy (15 minutes)
Critiquing Advertising and Health Campaigns (45 minutes)
Mind Mapping (30 minutes)
Evaluations (5 minutes)

Two key activities in the workshop were critiquing advertising and health campaigns as well as a 'mind mapping' activity where individuals would write on a board depicting the outline of a human head reference to various news and information sources. The number of sources written down, plus

Deleted: used
Deleted: determined to be

the relative importance of them (expressed in relative sizes of text) were displayed, provided a 'map' of the information sources.

Ethnocultural communities in Canada are often marketed to directly as emerging "markets" and opportunities for consumer dollars. Whether it's a message that is trying to sell something or providing important information about their health, messages are crafted to appeal to specific audiences using tools of persuasion like fear, humour, flattery and repetition.

Above and beyond regular literacy, offering communities tools and opportunities to develop media literacy can help individuals navigate a new media landscape and share information that is in their best interests. Discussion questions and example campaigns for the critiques can be found in **Appendix D**.

The mind mapping activity was a way for the group to take a look at different sources of information in their lives and question why they rely on or even recommend them to others. The first map focused on sources of news and the second on health information. Participants spent time reflecting on their different sources, witness similarities and differences within the group and share resources that are reliable for them.

Within the map of health information, it was important to note that the sources weren't exclusive to Western medicine or the idea of curing. Participants were also encouraged to identify home remedies or things that may have been passed down to them. These reflected cultural beliefs around care and healing. Often the ways that communities take care of themselves are not considered medicine. Whether they are customs, food or herbs, they are important to families. Examples of some mind maps can be found in **Appendix E.**

2 Location and Attendance

Between February 18, 2012 and March 29, 2012, CATIE delivered 6 Media Literacy workshops, reaching a total of 128 people. The dates, location and attendance are summarized in Table 1.

Table 1. Workshop Type, Dates, Location, Attendance and Funder.

| Community | Date | Location | Attendance |
|-----------|-------------------|-----------------------------------|------------|
| Filipino | February 18, 2012 | Magkaisa Centre | 19 |
| Filipino | February 26, 2012 | Kababayan Multicultural Services | 14 |
| Filipino | March 25, 2012 | PIDU | 14 |
| Pakistani | February 23, 2012 | Human Endeavour | 15 |
| Pakistani | February 29, 2012 | Human Endeavour | 15 |
| Punjabi | February 24, 2012 | Punjabi Community Health Services | 12 |
| Punjabi | February 26, 2012 | Punjabi Community Health Services | 15 |

| Chinese | March 29, 2012 | Catholic Crosscultural Services | 24 |
|---------|----------------|---------------------------------|----|
| | | | |

3 Methodology

Evaluation forms (English, Urdu, Tagalog and Chinese) were developed for the Media Literacy workshop. Evaluation forms were distributed to workshop attendees. Appendix A contains the evaluation form for the Media Literacy workshop.

Frequency descriptives were produced to summarize the outcomes of each of the workshops.

4 Evaluation Results

Media Literacy Workshops

Appendix B contains a complete analysis of the Media Literacy workshop in tabular format.

One hundred and fifteen evaluation forms were completed, representing a 90% response rate among the 128 attendees.

- 96% were satisfied or very satisfied with the workshop.
- 100% agreed or strongly agreed that the workshop was well presented.
- 100% agreed or strongly agreed that the workshop presenter was knowledgeable about the topic being discussed.
- 99% agreed or strongly agreed that the workshop was culturally appropriate.
- 98% agreed or strongly agreed that they were comfortable with the topics discussed.
- 99% agreed or strongly agreed that the workshop built on their capacity to analyze media.
- 99% of workshop participants intend to use the skills learned in the workshop to continue to analyze media.
- 99% of workshop participants reported that the workshop provided a space for critical thinking and discussion.

 98% of workshop participants reported the workshop increased their knowledge of Media Literacy.

Overall, the Media Literacy workshop was well-received by the respondents, and many commented that they would like to have more workshops like this on different topics. The majority also felt it would be useful if more resources were made accessible in their languages through different media outlets like reading materials, newspapers, and the radio.

Media Literacy Workshop participant comments can be found in Appendix C.

5 Conclusion

Overall, the Media Literacy workshop was very well-received. Participants were immediately able to apply critical thinking to the marketing campaigns that were presented. Discussions often went over the allotted time and partner organizations were interested in future workshops.

It is clear that an effective media campaign will be present at the community level in smaller media outlets specific to cultural and religious groups where they are already receiving their information. Participant responses also noted that individuals like to receive their health information privately and not through social means. It is also important to maintain ongoing relationships with the community organizations as they are trusted sources for information and referral to services.

Overall participants felt that the critical thinking skills they learned could be applied within their lives. The workshops were a meaningful way to engage the communities in the development of resources and a media campaign and promote ongoing discussion around health information is marketed to immigrants in Ontario.

Appendix A – Media Literacy Evaluation Questionnaire

| | | | | _ | |
|--|----------------------|----------------|--------|----------------|--|
| We would like your feedback on this Workshop! Thank you for taking the time to fill out this evaluation form. This information will be used to evaluate the event, improve future workshops and inform the project as it moves forward. Please circle or check only one answer per question. | | | | | |
| Date: Location: | Y | our age (optio | onal): | | |
| Please indicate your agreement with the follow. | ing statemen | ts. | | | |
| | Strongly disagree | Disagree | Agree | Strongly agree | |
| The workshop was well presented. | | | | | |
| The workshop presenter(s) was knowledgeable about media literacy. | | | | | |
| The workshop was culturally appropriate. | | | | | |
| I was comfortable with the topics being discussed. | | | | | |
| This workshop built my capacity to analyze media. | | | | | |
| I will use the skills I learned to continue to analyze media. | | | | | |
| This workshop provided a space for critical thinking and discussion. | | | | | |
| Overall, the workshop increased my knowledge of Media Literacy. | | | | | |
| Overall, how satisfied were you with this workshop? □ very dissatisfied □ dissatisfied □ satisfied □ very satisfied Which are your top TWO ways you prefer to receive news (please check only two)? □ newspapers □ radio □ tv □ websites □ social media (facebook, twitter etc.) □ word of mouth □ other: | | | | | |
| 4. What language do you prefer your news in? ☐ Punjabi/Urdu/Tagalog/Mandarin ☐ English ☐ other: | | | | | |
| 5. Which are your top TWO ways you prefer to receive health information (please check only two)? \[\begin{array}{cccccccccccccccccccccccccccccccccccc | | | | | |
| 6. What language do you prefer your health information in? ☐ Punjabi/Urdu/Tagalog/Mandarin ☐ English ☐ other: | | | | | |

| 7. | Do you have any recommendations on raising awareness about health in your community? |
|----------|---|
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| | |
| | |
| 8. | What were some of the things you liked most about some of the campaigns you watched today? |
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| 9. | What were some of the things you liked least about some of the campaigns you watched today? |
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| | |
| | |
| 10. | Do you have any other feedback for us? |
| | |
| _ | |
| | |

Thank you for your time and effort!

All responses are confidential and will be used to improve the services CATIE offers. Please return this form to a CATIE representative.

Appendix B - Evaluation Results - Media Literacy Workshop

Table 1. The workshop was well presented.

| Tuble if The Wollionop Was | Frequency | Percent |
|----------------------------|-----------|---------|
| Strongly agree | 66 | 58.4 |
| Agree | 47 | 41.6 |
| Disagree | 0 | 0 |
| Strongly Disagree | 0 | 0 |

Table 2. The workshop presenter was knowledgeable about media literacy.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 61 | 54.5 |
| Agree | 51 | 45.5 |
| Disagree | 0 | 0 |
| Strongly Disagree | 0 | 0 |

Table 3. The workshop was culturally appropriate.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 70 | 61.9 |
| Agree | 42 | 37.2 |
| Disagree | 1 | 0.9 |
| Strongly Disagree | 0 | 0 |

Table 4. I was comfortable with the topics being discussed.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 69 | 62.7 |
| Agree | 39 | 35.5 |
| Disagree | 2 | 1.8 |
| Strongly Disagree | 0 | 0 |

Table 5. This workshop built my capacity to analyze media.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 61 | 55.0 |
| Agree | 49 | 44.1 |
| Disagree | 1 | 0.9 |
| Strongly Disagree | 0 | 0 |

Table 6.I will use the skills I learned to continue to analyze media.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 61 | 56.0 |
| Agree | 47 | 43.1 |
| Disagree | 1 | 0.9 |
| Strongly Disagree | 0 | 0 |

Table 7. This workshop provided a space for critical thinking and discussion.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 70 | 64.2 |
| Agree | 38 | 34.9 |
| Disagree | 1 | 0.9 |
| Strongly Disagree | 0 | 0 |

Table 8. Overall, the workshop increased my knowledge of Media Literacy.

| | Frequency | Percent |
|-------------------|-----------|---------|
| Strongly agree | 68 | 61.3 |
| Agree | 41 | 36.9 |
| Disagree | 1 | 0.9 |
| Strongly Disagree | 1 | 0.9 |

Table 9. Overall Satisfaction

| | Frequency | Percent |
|-------------------|-----------|---------|
| Very Satisfied | 52 | 46.4 |
| Satisfied | 56 | 50.0 |
| Dissatisfied | 3 | 2.7 |
| Very Dissatisfied | 1 | 0.9 |

Table 10. Top two ways you prefer to receive news.

| | Frequency | Percent |
|---------------|-----------|---------|
| Newspaper | 49 | 42.6 |
| Radio | 14 | 12.2 |
| TV | 59 | 51.2 |
| Website | 57 | 49.6 |
| Social Media | 29 | 25.2 |
| Word of Mouth | 8 | 7.0 |
| Others | 10 | 8.7 |

Table 11. What language do you prefer your news in?

| · · · · · | Frequency | Percent |
|------------------------------|-----------|---------|
| Punjabi/Urdu/Tagalog/Chinese | 65 | 56.5 |
| English | 70 | 60.9 |
| Other | 8 | 7.0 |

Table 12. Top two ways you prefer to receive health information.

| | Frequency | Percent |
|-----------|-----------|---------|
| Newspaper | 37 | 32.2 |
| Radio | 17 | 14.8 |

| TV | 42 | 36.5 |
|---------------|----|------|
| Website | 56 | 48.7 |
| Social Media | 27 | 23.5 |
| Word of Mouth | 19 | 16.5 |
| Others | 30 | 26.1 |

Table 13. What language do you prefer your health information in?

| 3 3 , 1 | Frequency | Percent |
|------------------------------|-----------|---------|
| Punjabi/Urdu/Tagalog/Chinese | 63 | 54.8 |
| English | 76 | 66.1 |
| Other | 8 | 7.0 |

Appendix C – Media Literacy Workshop Participant Comments

7. Do you have any recommendations on raising awareness about health in your community?

- o New paper's, radio
- o Yes, classes in PCHS, TV
- O Doctor's needs to give more info about health
- o Workshops, Radio Programs, Health Magazines
- o Education on HIV AIDS & Hep C
- They should be at least one workshop of this kind in a month will be helpful to aware people against their diseases
- o More culturally appropriate workshops
- o Focus groups in different places like schools, religious places, Community Agencies
- o Doctors Newspapers
- o Talking about taboos & breaking it down
- o Engage people to learn how to be critical about where they get their health information
- o Pamphlets with free reliable and accessible resources for the public websites
- By giving them seminars about the symptoms and effects and importance of knowing the different health issues and problems
- o Needs to come from community as well
- Understand the barriers we face as an immigrant community in accessing proper, quality healthcare – Developing a culture of health all in a community that competency adhesive our life re working class Canadians
- As a community we should give more information and let the community aware of the health issues that's going on
- o Continue doing workshops like Media Literacy
- o More Workshops!
- o Keep on educating people
- Educate ourselves and members of the community. Research health-related issues in the community
- o Having a resource centre within the community
- o Support Groups
- o Small groups, talks shows, crating brochures in Punjabi
- o More workshops Public Awareness
- o More on radio topic for Health TV program on Health
- o Through media
- Yes, please continue to hold relevant workshops Seniors & young adults get a change to connect their thoughts
- O Utreach to religion communities where Filipino gathers
- o Use community settings like Human Gender to deliver information
- o Through the workshop in Vaughan Community Centre
- Contact community groups to deliver workshops, place brochures at doctor's office, community health centers
- o Through the workshop in the Vaughan Community Centre
- o Doing More presentations at the Masjid (Mosque)

- o More workshops
- Include information through social media and informational. Workshops are also a good way of reaching out to every community
- o More workshops like this one Pamphlets available at community centers, schools, work etc
- o It should be published in local news papers
- o Through Community organizations
- o Bring more information on different health topics
- o More health information sessions with bilingual moderators/facilitators and flyers in Tagalog
- o More workshops, reading materials (in Taglish), more available resources
- o Touch base with the medical professionals related to the community
- O Use locally available healthcare professionals to talk on health issues
- o Targeted campaigns (cultural)
- o More health workshops
- o Set-up health information centre
- More targeted campaigns relating to Filipinos (to be effective, will have to incorporate Filipino values, to appeal to Pinoy sense of faith – family, religion, cultural)
- O Just use all available media
- o Information dissemination through seminars and reading materials
- I would recommend to have more workshops for them to have a better understanding of their health
- Consult with target populations about tough issues. Provide info with current terminology appropriate to the target population
- Use of flyers for health info
- o Materials in Chinese
- o More workshops like this
- O Very good workshop. I'd like to participate more in workshops like this.
- I'd like to have more health-related workshops that cover children, women, middle-aged and seniors.
- o Give more information

8. What were some of things you liked most about some of the campaigns you watched today?

- o Internet
- o About Hepatitis C, HIV, Watch what media is doing
- o Learning about the advertisement which is selling the product but not health
- o Presenters were really good. More aware to analyze media literacy
- o We have watched video & got information from it. We discussed about this in a group
- o Video Clips Presenters
- o All the information is really helpful
- o Being able to analyze them
- o TV
- o Touched the Media Topic
- o Media Awareness
- o More info on preventing illness especially chronic illness that affect the community (i.e. diabetes)
- o They all brought about a lot of discussion, comments from audience
- o Be vigilant where will you get your news
- Discussion Many different examples Made me think about health/question health and meds. Message

- o I liked the ads that give information
- o The variety of content
- o Able to criticize & think about campaigns
- o Awareness about symptoms and signs of a death threatening disease
- o I liked the Diabetes campaign, I also liked the discussion around HIV
- o The discussion, critical analysis
- o Over exaggeration and humor
- o Creating awareness by relating to communities
- o Increasing concepts which I never really looked at before
- o Health, Job
- Was truthfully talking
- Good learning Corrections of social media globally
- o Media presentation
- Broad selection of topics & types culturally suitable. Easy to understand by all community members. Generated good discussion
- o The message is very well for their product
- o Explanation about health
- o The ad about TB had a very positive hopeful message and family support
- o About the media explained by doctor
- They were actually relevant
- o The way they targeted the products to the watching audience
- Presenter and the way she was close to our culture
- o The cultural values were appealed to: e.g. family values/closeness/heath
- It was very interactive and informative, comfortable atmosphere to share opinions Campaigns were picked well a lot of things to discuss about them
- o Media Literacy Add
- o Related to different type of advertisements
- o Informative Pros & Cons. Awareness of health soap life guard. Snacks were use healthy
- o Those with more information
- o The concept that they used in getting their points across (fear/flattery/humour)
- o The ad regarding diabetes seemed to teach more on general population
- o Enumerating well-known symptoms
- o Learning about how other cultures perceive health
- The Chinese ad with the family because it reminds me so much of how our own family is structured (matriarchal with high respect for elders)
- What I like most is the direct approach with which the message was delivered for Hepatitis B. It makes you stop and think about priorities. I like the Diabetes campaign because my attention was captured to stick with watching it until the end of the ad.
- Medical facts about diabetes
- o I like how we analyzed the commercials
- Entertaining
- o Showing/discussing of ads
- o Diabetes and Heart Disease prevention
- o Diabetes commercial
- Heart Disease and diabetes commercial
- o Analysis on commercials. Discussion on how to acquire skills of media literacy.
- o Public service announcements
- o Health-related

- o Heart disease prevention
- o The bright, colourful pictures, pretty actresses

9. What were some of the things you liked least about some of the campaigns you watched today?

- o TV, Internet
- o Companies use celebrity for advertisement
- O The fact that they were perceived as "good" advertising but had so many problems concerning misinformation and stereotyping that go under the radar until you really take it apart
- o Very "Correct" Positive but only to a point
- o Stereotypical society, homophobic messages
- o I don't like the campaign about women are being preyed on as commodities
- o Not able to compare different adds with other related ads
- o About sex campaign for colored women
- o Everything was good
- o Good
- Traditional approach Group discussion: Prior to open discussion, the group should be encouraged to talk on their own for a few minutes
- o Maybe more time to discuss barrier to access health information
- o Most of them focused in commercial products except one (Advertisement on T.B.)
- o Everything is good but some Ad's they are not giving the information about facts
- o Information about the T.B.
- o Information about the T.V. disease
- o That only show one side of the effect of the product with a bias opinion
- Geared too much towards only Pakistani Commercials, maybe it would be good to show some Canadian Commercials as well since the people at the workshops are also exposed to Canadian Media as well – Maybe with subtitles in Urdu or translation
- o Didn't dislike anything
- o Some of the material used was not straight to the point had to comprehend message
- o The ads that are vague
- o None
- The diabetes ad was not so appealing and creative to sustain my attention. Maybe if they described the person speaking it would have more appeal.
- The vagueness of the message especially of the generic commercial.
- o Giving false information
- o None
- Vague info was provided
- o Instant noodle and cosmetic product. I hate commercials that's acted by "sexy hot girls".
- Instant noodle commercial is a good one and attracts my attention. However, as delicious as the noodle looks, I won't buy it given how much trans-fat instant noodles contain. Sorry.
- o The foot in diabetes ad was too freaky

10. Do you have any other feedback for us?

- o Doctor has information
- I am appreciating Thumbs for "CATIE" we can learn about our health care and what is media doing

- o Keep up the great work
- o This is going to be very helpful campaign to aware people
- o Need more time for this kind of workshop
- o No
- o (happy face)
- o Thanks for giving the workshop. These need to happen more often for more people
- o Very good discussion, open, educational & CRITICAL
- o More content from Canada
- o It will be good if some of the campaigns/adds we watched & analyzed today also included those that are shown or cured in Canada (not just those from the phils)
- o Keep up the workshop more informative & updated
- o It would have been good if commercials carried in Canada were also incorporated
- o More Commercial in Canada
- o It was well presented
- o Very good program
- Try to include culturally relevant ads depending on the location i.e. Pakistani soap ad vs.
 Canadian Analyzing advance based or time & efficiency Inclusion of branding (logos and effects)/sports/graphics (no name vs. brand name)
- o Maybe Mental Health component as well
- Deliver information session on HEP C
- o I really like this workshop for information. Very friendly and informative
- o More workshops about health
- language specific information is needed for first generation immigrants, especially those who are seniors
- o more workshop like today's
- o No
- o If forming groups have a facilitator to assist people to physically move together and discuss
- o It was useful that it was in Urdu
- o Very good workshop Well done!
- Bring the topics in school. Bring the information to community. Bring information in Urdu, use easy and simple words of English
- o Continue the workshops and give more to health workers like PSW, caregivers
- o Great to learn about my own biases in handling information
- o Show more videos about how other cultures see medical history
- o More time needs to be allotted for discussion so more people can express their thoughts
- You are doing a great service in expanding knowledge on common health issues.
- o More interactive activities
- o Keep up the good work!
- The workshop was very well done. It was organized and the objective was accomplished. Resources were well done. This is a good point to start from for health information dissemination.
- Please ensure that when translating information not to do direct translation but evaluate in context of language of the target
- o I'd like to have more health related workshops in Chinese
- o Expand knowledge on disease prevention, high blood pressure, check ups
- I'd like to participate in Chinese workshops like this more often. Let more Chinese-speaking friends know about your workshops.
- o Commercials should be truthful. No exaggeration or lying.

- o Excellent workshop
- Previous workshop doesn't cover media literacy
 I'd like to have more workshops of different topics. This kind of workshop can increase new immigrants' knowledge on Canada.
- o The workshop should last a longer time.

Appendix D – Workshop Curriculum – Campaigns and Critique Questions





Questions:

What is the message?

Who is the message for?

What values does the message appeal to?

Does the message use fear, humour, flattery and repetition for persuasion? How?

What action does the message promote? (Selling something, supporting a cause, sharing information, getting tested, donating money)

Is there any health information included? What is it?

What did you like about this campaign? What did you not like about it?

Appendix E – Workshop Curriculum – Complete Mind Maps



