

## **Introduction**

Ever since the initial outbreak of Covid-19, transcontinentally there have been messages about staying home, wearing masks, and proper sanitation behavior. One organization that has provided vital information about how to stay safe during this pandemic across the globe is the World Health Organization (WHO). Through their #HealthyAtHome campaign, they have broken down the strenuous task of staying in lockdown into five public service announcements that strive for even healthier living: staying physically active, looking after our mental health, quitting tobacco, healthy parenting, and eating healthily.

## **Health Topic Description and Audience Analysis**

Throughout the progression of the Covid-19 pandemic, many nations have experienced some variation of a “stay at home lockdown”. Kids were sent home from the physical classroom and forced into variations of homeschooling and online school, and adults had to find a way to do their work from home. Even the shelves of stores started to resemble sets from an apocalyptic film as people stocked their houses with the goods they would need for the weeks of lockdown ahead. The World Health Organization addresses the difficulty of sitting around at home more than most people are used to. Their #HealthyAtHome campaign features advice for people to work through the effects of the pandemic in lockdown by highlighting changes in physical activity, diets, parenting, mental health, and tobacco use as key health topics. The purpose of this campaign is to use telehealth, or the organization and sharing of health information, to bring more awareness to personal health during lockdown. However, given diversity of age, location, and economic status, the use of telehealth puts certain groups at a disadvantage. Although the campaign is worldwide, and therefore hopes to benefit as many people as possible across many different cultures, those affected by a digital divide- such as a limited access to the internet or

who have a low technological literacy- are at a disadvantage and are less likely to benefit from the recommended behaviors. Based on the website, most people who are interacting with it are younger generations, possibly many parents and caregivers given the sections of the campaign on parenting and caring for young children. Infographics for pregnant women and caregivers for children under the age of five are highlighted too, benefiting young mothers and parents across the globe. Those who have older children, or are not parents might not be involved in some of the recommended behaviors of the campaign since it seems to largely target families.

Additionally, the elderly might not be involved if they don't have the proper technology or skills to be aware of this specific campaign. It would be difficult for an elderly person who lives alone to gain access to this website without someone drawing their attention to it. People with a lower income also might have a similar struggle of finding access, or simply being aware, of this website campaign. It is worth mentioning that personal beliefs, whether related to religions or political beliefs, might affect the population of people involved in the recommendations of this campaign. Certainly in the U.S. there have been very conflicted personal views about the pandemic, and an individual's personal beliefs may influence their willingness to stay home, or interact with this campaign.

Considering the various possible interactions with the campaign given a variety of influencing factors, the most important behavior recommended by the campaign is limiting social interaction and staying home as much as possible. Although this can be difficult given the diversity of social interaction across cultures, ages, and identities, #HealthyAtHome aims to do what it can to suggest healthy behaviors to as large of a demographic as it can. By focusing on five key categories of physical, emotional, and social health, the campaign suggests that a person could actually improve their health during a pandemic lockdown. The section on physical

activity advises daily activities such as stretching, walking up stairs, dancing to music, and trying online physical activity classes and workouts. Infographics about the amount of physical activity each age group needs are posted under this section of the campaign, identifying the ranges of physical activity between children, adults, and the elderly. Benefits to keeping up some form of physical activity are explained as reducing risks of depression, decreasing risk of falls and for older people, and improved balance and strength. WHO recognizes that having to stay inside and have routines change so quickly and dramatically has a significant effect on not only a person's physical health, but their mental health too. #HealthAtHome's section entitled "Looking After Our Mental Health" recommends creating new routines to help keep a balance of mental health, and personal hygiene. A number of bulleted suggestions for looking after mental health during an extended home stay is provided, including creating a routine for staying at home, limiting drug and alcohol use, and limiting screen time from things such as social media, video games, and television. Related to the topic of mental health, "Quitting Tobacco" is the third section of the #HealthyatHome campaign. Since the risk of Covid increases for smokers, WHO brings attention to the increased risk of lung infection and the importance of working towards quitting. A list of four ways to decrease cravings is provided: delay, deep breathing, drink water, and distractions. Possibly another goal of including this as a part of the campaign is to give hope to people who are wanting to quit their tobacco use during a time that feels somewhat "hopeless". The campaign includes several different ways under each of its five categories that expresses the opportunity for change and improvement; parenting is not excluded from this. "Healthy Parenting" covers topics of parenting related to the emotions of children during the pandemic and how to engage children's understanding of the virus. One way the website introduces this is through proper hand washing. Links to Peppa Pig video clips on hand washing and links to

further information about how to keep children safe during the pandemic are included for caregivers accessing the website. The last section that the campaign includes is the “Healthy Diet” section. Underneath this section are a variety of different diet related topics: suggestions for how to maintain a healthy diet through lockdown, a video on food safety tips, food “mythbusters”, and several social media graphics on nutritional tips. Some of the “mythbusters” listed relate to how to safely shop for food and how to wash fresh produce.

After identifying the main categories of the campaign and analyzing the audience that is most likely to interact and engage with the recommended behaviors of #HealthyAtHome, the Social Cognitive Theory and the Health Belief Model can aid in identifying how an individual that is targeted by this campaign might respond to it. For example, a 30 year old female named Victoria. Victoria raises her four year old alone after her divorce from her husband about five months before Covid broke out. Socioeconomically, she is at a disadvantage by being a single parent. However, she is educated and has a steady income from her job. She works as a teacher at an elementary school. Before the start of the pandemic and her divorce, her lifestyle had a bit more freedom. She could take her son on little vacations over the summer, and enjoyed getting coffee with her older sister every Sunday. Since then, she has struggled to feel like she is doing enough as a parent since she has had to work through her emotions and anxieties. She worries that raising a young child alone during lockdown while also trying to figure out how to teach her students remotely will only increase her stress and complicate her mental health. By the time the evenings roll around and her child is asleep, she resorts to a glass of wine and avoids answering her sister’s texts because she feels too tired and doesn’t want her sister to think she is a mess. Victoria cares most about making sure those around her are taken care of more than she worries about her own well-being, and is kept up at night about how to best keep her four year old

healthy and happy during this uncertain time. Like many others, watching the news only makes her more anxious. When her sister reaches out to her one night expressing concern about her well-being given all the pressure and stress she has been under, she sends Victoria a link to the #HealthyAtHome campaign and a reminder that she is doing great at balancing all her responsibilities. Given the encouraging message following the link, Victoria decides to check it out. She thinks it can't hurt to see if there is anything helpful for her son through this link, and since she feels so alone and overwhelmed, her sister might know more than she does. Upon exploring the tabs about parenting and physical activity, she feels more hopeful about new ways to keep her four year old active and ways for him to get out his energy in the house. She decides she will sit down and show the video of Peppa Pig about hand washing to her son in the morning and decides to even share it with her class through an email to the kid's parents; suggesting the campaign to other young and possibly struggling families. After checking out the mental health tab, Victoria feels annoyed and flustered with the suggestion to avoid alcohol. Deep down, she realizes she is not helping herself by drinking a glass or two every night, so she is reluctant to make this change at first. But she does decide to start having zoom calls with her sister at night instead of pouring herself a glass of wine. Analyzing an audience like Victoria, the Health Belief Model can break down her feelings and behaviors of the health crisis into the six factors: she feels susceptible to both the physical and mental aspects of the pandemic, she feels the risk is severe because of her love and concern for her young child, she feels her social status as a single and working mother are obstacles in the way of her and her son's well-being, when she is sent the link to the campaign she feels the advantages of checking it out will benefit her son, and she feels that her older sister is more health-sufficient than she is given her age and their close relationship. Lastly, the behavioral cues the campaign exposes her to she finds mostly

helpful-maybe even a ray of hope amid her overwhelming stressors. The campaign makes her feel less alone as she realizes many parents (single or not) must be struggling similarly if there is a whole section dedicated to it. She has always wanted what is best for her son, and seeing a web campaign that recognizes the mental and emotional struggles of sheltering in place and well as the struggles of parenting during such unusual times is comforting to her. Additionally, since her sister and her responsibilities influenced her engagement with the campaign, as well as her own feelings and thoughts about the level of stress she is dealing with, the Social Cognitive Theory would indicate that Victoria has both environmental and internal factors urging her to do something about the concerns she has. The changes she makes after coming in contact with #HealthyAtHome is more likely to be beneficial since the environmental and internal factors are aligned.

### **Channels of Communication**

One of the five highlighted PSA's for #HealthyAtHome explores the importance of maintaining mental health during lockdown, giving recognition to how much changes in routine can impact biopsychosocial health. Upon first accessing the campaign site, the five PSA's are organized into blocks with bolded titles highlighted in a bright blue, and a photograph related to the topic underneath the highlighted title. Beneath the title is an orange button that reads "more" for users to click on to access the PSA information. This format is effective in display: it immediately describes what the PSA is about, and has an effective layout that tells the user how to access more information. After clicking on the "more" button, there is an introductory paragraph on looking after mental health before breaking down the information into ten bullet points: dividing the most important tips for looking after mental health. By separating the ten tips into smaller bits of information, the PSA seems less daunting and users might be less likely to

dismiss the information because it looks like “too much” to read. This format not only makes the information more comprehensible, but is more motivating for users to at least read the bolded bullet point. Whether they choose to read the following two sentences after the bullet point or not, the main idea stands out to those accessing the PSA. Below the bullet points are three options for additional help labeled: “if you are a parent”, “if you are an older adult”, and “if you have a mental health condition”. There is an option users can click on to “show more” which reveals further bullet points based on whichever category was selected. For further help, the PSA suggests reaching out to health-care providers and therapists for additional help, as well as listing WHO’s social media platforms.

Looking at the effectiveness of the mental health PSA, it’s organization is consistent with that of the whole online platform. As already stated, navigating the five different PSA’s is simple given the labels for each section. Clicking on each PSA to reveal the information is effective because it breaks down everything so that the amount of information in the campaign doesn’t feel overbearing and overwhelming. If all the information from the PSA’s were compiled together, the sheer amount of information and lack of organization might ward off users. Although the platform has many links to other resources and suggests other platforms to visit through WHO, there is still a good balance of sufficient information on the campaign platform. The ranging of ideas for staying physically and mentally healthy are not only compelling in the way they describe creative new ways to stay healthy, but they are empathetic to the challenges of adapting. By using telehealth, the campaign allows a wide and free access to health related advice, other platforms for more information, and encourages seeking additional help if users find themselves severely struggling. The convenience of the online platform and built-in online “buffer” of understanding can be motivating to those who interact with the website since it

comes across as “real” and “relatable”. The website doesn’t sugar-coat the situation, but communicates with users in a way that inspires users to feel that they can cope with this dramatic change by reminding them that they are not alone in this process.

Overall, the broken down PSA’s and the online platform as a whole compliment each other well: the main goal of both are to promote various coping strategies during the pandemic and through an extended period of lockdown. The various areas of health that can be maintained or even improved compliment a narrative of sorts: that despite facing a worldwide pandemic, it is possible to come out the other side healthier than before the start of the pandemic. This creative and optimistic outlook defines the #HealthyAtHome campaign for many people, parents, children, elderly, and those with mental and physical health concerns across the planet. The only concern with the online platform being that it is geared towards the whole world, are for those who face a digital divide of some form. Since WHO is an international organization, they should recognize the obstacles of location, socioeconomic status, and age that can interfere with the spread and awareness of their campaign. That being said, using an online platform for PSA’s is about as universal as an organization can get. If the PSA’s were to have physical posters in populated areas too, this might improve how inclusive this campaign is.

### **Conclusion:**

Considering the widespread concepts and goals of the worldwide #HealthyAtHome campaign, the impact of the platform could be summarized as a social support network of sorts. The PSA’s provide the feeling of a virtual community by serving as a reminder to many people that they are not alone in their anxieties about Covid and lockdown. The site addresses families as well as the elderly, those that struggle with mental health/addiction as well as those with



physical concerns. The fact that the five PSA's can be applied to individuals and families anywhere in the world is a huge strength of the campaign; at the end of the day, everyone needs to look after their physical and mental health, as well as the health of their families: whether that be the family they come from, of their own family. Although the Health Belief Model and the Social Cognitive Theory serve as a reminder that the progression of peoples thoughts about health are different, #HealthyAtHome covers the most important basics using an easy to navigate online platform that overall, is inclusive to the world.

## Works Cited

Pré, D. A., & Overton, C. B. (2020). *Communicating About Health: Current Issues and Perspectives* (6th ed.). Oxford University Press.

World Health Organization (WHO). (2020). *#HealthyAtHome*. #HealthyAtHome.

<https://www.who.int/campaigns/connecting-the-world-to-combat-coronavirus/healthyathome>