Listen – let's get the message across

by Retha Claasen-Veldsman and Maritha Snyman

In the successful communication of information, the communication medium plays an extremely important role. To effectively communicate information, a proper match between audience, message and medium should exist.[1, 2]

In this process the accessibility of the chosen medium is crucial; implying both physical and semantic access. Physical access means that a receiver must be able to locate, operate and use the device that acts as a mediator between the communicator and the receiver. Semantic access refers to the comprehension process. A receiver must understand the information contained in the message that is transferred via the medium. Without physical and semantic access effective communication cannot take place and information cannot be transferred.[3]

The advantages of using audiocassettes/CDs in information communication have been documented; but the recorded audio medium has not yet been extensively explored or employed in information communication in South Africa. There is a tendency in South Africa to focus on the printed medium. This is for instance seen in the use of printed brochures when communicating information about HIV/AIDS.[4] Because of the pro-literacy bias in the communication of health information in South Africa, the need to explore the potential of the audio medium vis-à-vis the printed medium for the communication of health information was identified. The hypothesis was that audiocassettes/CDs, categorised as a small mass medium,[5] may have the potential to more effectively communicate health information to the general South African public than printed brochures (also a small mass medium).

Research

In a case study designed to compare brochures and audiocassettes/CDs as suitable media for health information communication, two brochures of the National Department of Health's *Khomanani Caring Together* campaign for the communication of HIV/AIDS messages were selected. The information contained in the brochures was recorded onto audiocassettes/CDs in the same format and languages. The accessibility of the two media was tested by communicating the same message through the two different media to different members of the same target audience. Seventy-six participants were selected at four public health clinics in the greater Tshwane municipality, Gauteng; by using a combination of purposive quota sampling and volunteer sampling.[6] Usability testing as described by De Jong & Schellens [7] was adapted and used as guideline for the data collection. The evaluation criteria were, amongst others, physical accessibility and comprehension (semantic accessibility). The data was collected through semi-structured individual interviews.

The collected data of both the audiocassette/CD and brochure evaluations was separately analysed by means of qualitative content analysis, through the use of deductive and inductive coding procedures.[8]

- The questions relating to the comprehension of the texts were analysed deductively by measuring the information provided in the original texts with the comprehension of the participants. The responses of the participants were analysed and counted as part of the qualitative content analysis process in order to "identify, organise, index and retrieve data".[8] The correct answers and other identified textual elements, for example the amount of responses not stated in the original text, were counted and then used to compare the comprehension of the two groups. Responses that were clearly based on the participants' own knowledge and not gathered from the messages in the brochures and/or audiocassettes/CDs were not considered.
- An inductive, open coding approach was followed to determine the participants' attitudes towards the accessibility and acceptance of the medium they were exposed to.

Findings

The physical accessibility of the audiocassettes/CDs is high. With the exception of two participants, all of the participants who were interviewed owned an audiocassette or CD player.

Semantic accessibility (comprehension) is higher in the case of the audio cassettes/CDs. The overall recall* of the participants who had listened to the audiocassettes/CDs was higher than that of the group who had read the brochures. Not only could the group who listened to the audio messages recall more of the specific texts than those who read the brochures, their answers were also more direct and specific. The prevalence of responses that were never mentioned in the texts was also significantly higher in the group who read the brochures than that of the group who listened to the audiocassettes/CDs; indicating that they did not effectively understand what they had read.

Conclusion

This exploratory study indicated that recorded audio media can be useful for communicating health information.[3] Further investigation into the potential use of audiocassettes/CDs, and other applications of recorded audio messages, in the communication of information should be undertaken. Research should include developing guidelines for the creation of recorded audio messages; an investigation to determine the feasibility and cost of developing such messages; and ways in which these messages could be made available to the public.

* "Poor recall of a text may also be an indication of poor comprehension, since it is easier to remember things that one understands".[9]

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Telesensing

How it works: A telesensing mobile phone will measure the cellular waves bouncing off your body to track your heart rate, pulse, and breathing pattern. Such a phone could dial an emergency number automatically when you're having a heart attack, or it could even be used as a sophisticated baby monitor.
Who's working on it: Bell Labs
Due out: Not before 2013

future gadgets