

**ADDIS ABABA UNIVERSITY SCHOOL OF JOURNALISM AND
COMMUNICATION**

**ASSESSMENT OF URBAN HEALTH STRATEGIC
COMMUNICATION: THE CASE OF ADDIS ABABA HEALTH
BUREAU**

**BY
WENDIMU TAYE**

**JULY 2019
ADDIS ABABA**

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COMMUNICATION: THE CASE OF ADDIS ABABA HEALTH
BUREAU.**

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Abstract

The study conducted at Addis Ababa regional health bureau, Arada and Cherkos Sub cities health Offices. The purpose of the study is investigating the problems of setting urban based health communication, strategic planning to improve the health status of the community. The researcher uses qualitative methods of investigation due to the nature of the claim. The research sites and key respondents were purposively selected. In-depth individual interviews and focus group discussion data collection instrument were constituted. The finding result shows the organization's communication strategy is laid-back to the city context, health messages are unintentionally developing and its scheme of communication is inaccessible are the major gaps. Hence, in the context of Addis Ababa exchange of health information has a limitation.

Table of Contents

	Page
Abstract.....	i
Table of Contents.....	ii
List of Acronym.....	v
ACKNOWLEDGEMENT.....	vi
Chapter One.....	1
1. Introduction.....	1
1.1 Background of the Study.....	2
1.2 Statement of the Problem.....	3
1.3 Objectives of the Study.....	5
1.3.1 General Objective.....	5
1.3.2 Specific objectives.....	5
1.4 Research Questions.....	5
1.5 Scope of the Study.....	6
1.6 Significance of The Study.....	6
1.7 Organization of the Study.....	7
Chapter Two.....	8
Review of Related Literature.....	8
Introduction.....	8
2.1 Theories of Public Relation.....	9
2.2. System Theory.....	13
2.3 Social Theory.....	15
2.4. Publics as Relationship Management.....	15
2.5 General Planning of Strategy.....	16
2.5.1 Setting up a Strategic Communication Plan.....	16
2.5.2 Modernity Theory.....	17
2.5.3 Relationships Theory.....	17
2.5.4 Strategic Communication Theory.....	17
2.6. Health Communication Strategy.....	18
2.6.1. Health Communication Models.....	19

2.6.2. Principles for Effective Health Communication	20
2.6.3. Theories of Cognition and Behavior	21
2.7. Theories of Mass Communication	21
2.7.1 Concerns and Issue: Power and Language	22
2.7.2 Social Media as a Powerful Tool.....	22
2.8. Summary	23
Chapter Three	24
Research Methodology	24
Introduction.....	24
3.1 Research Design.....	24
3.2. Data Collection instruments.....	25
3.2.1 In-depth individual interview	25
3.2.2. Focus group discussion (FGDs)	26
3.3. Qualitative Methods.....	26
3.4. Sampling Techniques and size.....	27
3.5. A Brief Profile of Research Locations	28
3.6. Data Analysis and Interpretation Techniques	28
3.7. Data Recording Procedures.....	29
3.8. Ethical consideration.....	29
3.9. Challenges faced during data collection	29
3.10. Summary	30
Chapter Four	31
Presentation and Analysis Data	31
Introduction.....	31
4.1 Data from interview	31
About Knowledge of health communication strategy.....	31
4.2 Data from Focus Group Discussion	39
4.3 Document analysis	40
4.3.1 Leaflet.....	40
4.3.2 Poster	41
4.3.3 Billboard.....	41

4.3.4 Audio	41
4.3.5 Audio Visual document.....	41
4.3.6 Internet.....	42
4.4 Discussion	43
Chapter Five.....	44
Summary, Conclusion and Recommendation.....	44
5.1 Summary	44
5.2 Conclusion	44
5.2 Recommendation.....	45
Reference	46
Appendixes	

List of Acronym

AACAHB	Addis Ababa City Administration Health Bureau
AAHB	Addis Ababa Health Bureau
AARHB	Addis Ababa Regional Health Bureau
AIDS	Acquired Immune Disease Syndrome
BCC	Behavioral Change Communication
BOFED	Bureau of Finance and Economic Development
CSA	Central Statistical Agency
DRC	Democratic Republic of Congo
EBC	Ethiopia Broadcast Corporation
EFY	Ethiopia Fiscal Year
FMOH	Federal Ministry of Health
HAPCO	Hiv/Aids Prevention and Control Office
HE	Health Extension
HEO	Health extension Officer
HEAT	Health Education and Training
HIV	Human Immune Virus
HSDP	Health Sustainable Development Plan
IEC	Information, Education and Communication
OPD	Out Patient Department
PHC	Primary Health Care
PMC	Population Media Center
PMTCT	Prevention of Mother to Child Transmission
PR	Public Relation
SCF	Strategic Communication Frame
WHO	World Health Organization

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Chapter One

1. Introduction

“A strategy is a means to an end. “The end concern the purposes and targets of the organization” (Thompson, 2017). Similarly, Bennett (1996) described the strategy as “the directions that the governing body chooses to follow to fulfill its mission”. Consequently, the researcher attempted to find out the problems of setting urban based health communications, strategic plan to improve the health status of the residential district.

Also, Kreps (2009) argued the environment is not simply a physical environment but is an information environment. Many Peoples exchange information through several means of communication. Individuals can reach a decision based on the information they have. In addition, local, national and global factors can be determining their decision. Hence, to improve health status of the community strategically planned and coordinated way of communication is fundamental.

Hence, the study specifically focuses on planned health communication, implementation problems in the case of: Addis Ababa health bureau including the two sub-cities, namely Arada and Cherkos sub cities Health Offices. Therefore, the study covers an introduction, background of the study, statement of the problem, reviewed literature, research design, data analysis, and finding part.

1.1 Background of the Study

Addis Ababa regional health bureau is going to produce a healthy and productive citizens by improving the health status of the community. Communication is the primary tools in preventing and controlling diseases. But, according to a survey conducted in Addis Ababa shows that 51% of death were caused by non-communicable diseases (AAHB, 2016)”. Similarly, some positive health behaviors now a day in a change process. For instance, breastfeeding is replaced by bottle feeding (MOH, 2008). Additionally, 70% of urban residents were live in the house below standard (MOFED, 2015). The Practice of open defecation, prevalence of HIV/AIDS and diabetes infection are the major health risk factors of the city (CSA, 2015/16).

In contrast, communicable and non-communicable diseases are easily prevented and control through communication. But, the above health factor was happening due to the communication strategy that the regional health bureau implemented both at the center and the sub-cities are not exerting influence or change behavior of individuals appropriately.

By and large, the above facts indicate that the Addis Ababa city has unique characteristics, thus, it needs comprehensive and integrated strategic communication. Hence, the main objective of this study is investigating the problems of setting urban based health communications strategic plan to improve the health status of the community.

1.2 Statement of the Problem.

Health communication planning is making decisions about what to do and how to do. A provision in the health sector also enables to find the most cost-effective ways of reaching a set of defined targets. If the priorities of interest as well as communication efforts to be exerted; and resources are to be allocated in the sector duplication of efforts and wastages of resources will be an unacceptable problem. Similarly, (Melese, 2011) argued that communication intervention has played a key role in the success of the national disease prevention program, but still low in Africa.

Addis Ababa health bureau, health, transformation plan also indicates “communicable, and non-communicable diseases, as well as physical injuries, are major health problems of the city” (AAHB, 2016). In addition to that, the city has a lot of health variables that alter risk due to higher rate of migration, overcrowding, slum area, lifestyle modification, accident, mental sickness, stress, air pollution, poor waste disposal mechanism, the rise of non-communicable diseases, socioeconomic and global factors are also the major health problems (AAHB, 2015). The current health reform and the changing environment require timely and reliable information that contributes to an individual’s behavioral change to improve his/her health status.

On the other hand, the communities are primary health care agents that work upon the undesirable health behavior of their family members as well as dwellers. Enhancing community participation, using appropriate Communication tools and clear messages have a leading contribution to bring social behavioral change at household level. In contrast, Analysis of the Socio-environmental science model to assess components that health communication interventions have failed to address the leading factors of Health.

Although, the communication strategy exerted by the city health bureau unable to come up to some segment of people like homeless, street dwellers, and disabled person. Inaccessibility of health information was caused by the low attention of the government bodies to the critical health problems of the urban center. However, communicable and non-communicable diseases, risk factors to be easily eliminated through a well-organized communication system. In this regard the organization has the problems of integrated health communication plan Implementations of the subject area. Despite that, under the regional health bureau, urban health extension and primary health care team and public relations are mandated to coordinate and regulate health communication but they are functioning separately. In that respect is an overlapping role between public relations and urban

health information, education and communication team. This indicates that attention paid to health communication intervention is very low.

The national health policy boldly indicated prioritized Health education and community mobilization as priority interventions to address most health problems in the country (FMOH, 1990). This indicates that the city needs an urgent effective communication strategy to be implemented to alleviate the burden.

Worried with the above facts an integrated and comprehensive health communication program planning is the major problem of the study. Hence, the intent of this study is identifying the major strategic health communication intervention.

1.3 Objectives of the Study

To achieve the purpose of the study, the following objectives are formulated:

1.3.1 General Objective

The main objective of this study is investigating the problems of setting urban based health communications strategic plan to improve the health status of the community.

1.3.2 Specific objectives

- Identifying the major urban health communication strategy knowledge gaps.
- Analyzing the quality, accuracy, and availability of health messages.
- Assessing implementation of need based health communication.

1.4 Research Questions

The following central and associate sub key research questions are adopted to investigate the major problems of Addis Ababa City urban health strategic communication.

1. What are the major health communication gaps?
2. How to determine the quality, accuracy, and accessibility of health messages?
3. How to prioritize major health issues to develop messages?

1.5 Scope of the Study

Initially, the study confined itself on the assessment of urban health strategic communication the case of: Addis Ababa Health Bureau. This scheme is very broad to cover all health program communication strategies. Again, strategic communications are various by its nature. Hence, the study specifically focuses on integrated, operational strategic communication executed by the regional health bureau.

The study sites are AARHB, Arada, and Cherkos Sub-cities health Offices. “The purpose sampling methods decrease the generalizability of finding” (Creswell, 2014). Therefore the study will not be generalizable to all areas of health program strategic communication. The study did not treat each and every health program communication in detail, but stress on strategically communicating knowledge to achieve organizational objectives.

1.6 Significance of The Study

The purpose of this study is analyzing integrated, operational strategic communication executed by the regional health bureau at Arada and Cherkos sub-cities. Here, the word strategy is defined as a road map of specific activities that reached on intended goals. Looking at an understanding of a responsible body about strategic health communication adopted by the federal ministry of health is the intent of the study.

“A communication program is a formulated set of activities towards target internal and external audience” (Cornlissen, 2014). Hence, this study focus on the applicability of national health communication strategy and related knowledge gaps (deficiency). To go deep in assessing how the communication strategy exerted by the city health Bureau is going to build a mutual beneficiary relationship among the residents?

Focus group discussion, individual’s interview, and document analysis methods of inquiry were executed. Eleven interviewees and sixteen FGD key participants of the study were purposively selected. Additionally, integrity of accountability and ambition of the organization throughout their communication strategy were also analyzed. Finally, the study may contribute something for further study in the area.

1.7 Organization of the Study

The study organized into five chapters. The first Chapter is the overview of the study under the introduction part, the background of the study, the Statement of the problem, objectives of the study, scope of the study.

The second chapter deals with related literature in focus on system theory, communication, public relation theory, and strategic communication theory. Scholarly literary works that related to the study has been used. Chapter three deals with research methodology and instruments of data collection are used to reach the main problems of study. Chapter four is collected data analysis and interpretation part of the study. Chapter five is about the conclusion and recommendation of findings.

Chapter Two

Review of Related Literature

Introduction

This chapter briefly discussed the specific contents and thoughts related to the study. It mainly concentrates on the definition of terms, strategic communication theory, system theory, public relation theory, and health communication models are the major area of the literature review part. Finally, literary works of different scholars were cited in APA style.

Definition

The strategy is “the directions that the organization chooses to follow to fulfill its mission” (Bennett, 1996). Currently, many organizations have a strategy to help to reach objectives. It deserves a long-term impact to achieve its program objectives cost-effectively. Strategic communication is the “purpose of use of communication by an organization to fulfill its mission” (Ruler, 2007).

Strategic communication is: “A method or plan chosen to bring about a desired future, such as achievement of a goal or solution to a problem” (Cancino, Voldgaard, and Strunck, 2016). Hence, the sense of strategic communication is not unintentionally communicating rather purposefully communicates to reach the target with its mission.

Mintzberg et al (1998) describes five uses of the word ‘strategy’ as the following:

1. A plan as a consciously intended course of natural process.
2. A ploy as a specific maneuver or movement intended to grow the better off an opponent or competitors.
3. A pattern representing a flow of actions.
4. A position as a way of locating an organization in an environment.
5. A perspective as an integrated way of perceiving the world.

As a sustainable development and creativity project, "Strategic Communication is a plan to include all of its organizational programs, public education and advocacy." It has also served to build greater dedication and strategies, rather than repeatedly responding to the media inquiry. (<http://www.spinproject.org>).

White acknowledges the central role that communication with stakeholder's plays in strategic thinking and operations management. Today's generic models of strategy highlight four approaches: the organization should have a full and competitive strategy for each activity. Functional strategies contribute directly to competitive strategies (Thompson, 1995).

'A good or bad health of people determined by the knowledge, opinions, attitude, and practice of the person (Melese, 2011: 13). In contrast, WHO stated development communication is a researched and planned procedure. It means communication gap analysis would be attempted to identify and re-plan (WHO Fact sheet (2013)).

Dina, Martin, and Anne (2011) also described how Thailand makes a successive health system by sticking in a plan of key programs and setting the agenda to receive high priority for policy makers. They believe Communication needs to be interpreted and used as a process and not simply a collection of print material. Radio commercials, television ads, and newspaper messages to alter what people think and do (Chatterjee, 1999). Contemporary everyday life is determined by increased complexity, rapid change, globalization, and the deconstruction of social structures.

2.1 Theories of Public Relation

Public relations are a multidisciplinary subject as well as the young field of study. This is the case that to have more than five hundred definitions many of them are connected to historical stages. The researcher focuses on the early definition which is, "Public relation is building a good reputation based on clear ambition and accountability" (Ruler, 2014).

It is obvious that public relations theory is rooted in a number of disciplinary domains, such as mass communications, interpersonal/ speech communications, (social) psychology, economics, and sociology, and in different schools of thought, such as functionalism, constructivism, feminism, Marxism, or cultural theories into rhetorical, critical and systems approaches (Ruler, 2014). "Many different definitions of public relations have been offered, but it is mostly accepted that public

relations are strategic communication between an organization and its publics” (Vasquez & Taylor, 2000).

Hence, one model is insufficient to explain and illustrate all phases of the communication process by its nature. On the other hand, public relations theory has two principal approaches that are “communication approaches” and “organizational and management approaches.” Communication approaches are how an organization relates itself to the public sphere and to society at large whereas organizational and management approaches concerned with appearances of organizational behavior and societal legitimacy (Habermas, (2007:56). Hence, public relations has managed function that governs the overall organizational activities with respect to the vision and mission of the institution. Public relation theorists like (Habermas, 2007) believe as strategic communication used to undermine the critical public sphere.

In contrast, a strategic communication plan has the ability to transform an organization: both in terms of your credibility and status in your community and in terms of the way you work to gather as a team to achieve your mission and vision for your community (Ruler, 2012). It also includes internal and external situation analysis, mission, vision, and aspiration of the organization. Internal situation analysis helps us to identify trends and development of the organization including opportunities and menaces. Issues worried our colleagues and ability of functioning in groups analyzed through strategic communication frame.

(Barney, 2014) in his first book of public relation defined PR as “public relation with concepts of engineering of consent, which entails trying to ensure people consent with the help of persuasion”. The German communications scholar also described the three approaches of public relations: “Product-oriented, marketing oriented and societal oriented”. Founded on their point of view product orientation can be likened to a one-way model of public relations or publicity model, whereas a marketing orientation can be associated with an asymmetrical two-way model. Nevertheless, the societal perspective cannot be related to the two-way symmetrical model, because this view uses the society as a whole as a unit of analysis and considers its social structure and institutions to be the basis and the outcome of public relations (Ruler, 2004).

Besides that, four models of public relations informational, persuasive, relational, and discursive that are rooted in information processing theory/functionality, mass communication theory, social

psychology, interpersonal communication, and consensus-building theory, and speech communication and rhetoric, respectively (Ruler, 2012).

On the other hand, a study on communication for social development confirms research and adoption of several models of communication such as diffusion of innovation, persuasion, opened and social marketing approach became important elements in the development of the issue (Teffer, 2008). Hence, the process of public relations needs to develop various programs such as the writing and issuing of press releases or publishing magazines to promote organizational activities, generate understanding and deals with crises. Consequently, health is related to a different field of study as well as it needs the involvement of the community to prevent diseases. So that communication plays a substantial role in the development of human life.

John Marston and Wilcox (2013) carried out the process of public relations activities were articulated by Marston in the 'RACE' acronym. The procedure consists of four elements such as Research- which is identifying the problem. Action and planning- what is going to be done about it? Communication- how we will tell the public? Evaluation- was the audience reached and what was the outcome.

The Feedback of the target audience is very essential to know and re-plan our communication. For this reason, organization will have their own communication strategy that linked with their mission, vision, and value unless it is difficult to bring social behavioral change.

Strategic Communication Frame



Source: public relation and social theory: key figures and concepts. (Oyvind Ihlen & Betteke Van Ruler, 2007).

The above eight building blocks of strategic communication frames were affirmed by a Van ruler that helps to understand how to communicate effectively to accomplish organizational objectives. The meaning of the strategic communication framework is described as the following: Values are the translation of your imagination. Just to write them is not enough, they give ‘meaning’, spirit, energy. Everybody in the organization, whether full-time workers or permanent and supportive staff, they must visualize the vision of the system. Key values must be visible in behavior, style of advising, actions, leadership. Practical Implementation of activities is a central factor. The other point is the internal and external Situation analysis is real important. Begin with prioritizing issues that are relevant to the effectiveness of the organization in the long run such as identifying trends and growths in the organization, views of internal staff and publics, trends or issues worried colleagues the most. Which trends, developments, issues are giving new challenging perspectives? Trends & developments are relevant from client, stakeholders and professional take into consideration during internal and external situation analysis should be done.

Although resources are very important to perform communication activities in a more beneficial way. It also conceptualized as used to result and cost-effective mode. It begins with Identifying kinds of resources that the organizations have included human power. When you desire to have a

good picture of the organization, you need to research it. Every establishment has its values, ambitions and priorities, strategy, culture and unique characters, whether it is written or not. Interpreting them is the core. What's the view on internal organization and communication within the organization? Does it see internal Communication as interactive or more as instrumental?

The other point is with whom we want to cooperate and develop a relationship? What is our story towards them? What do we want exactly (content)? How do you realize it? Those questions will do while making a relationship with stakeholders (Cornelissen, 2014).

Generally, Van Ruler strategic communication frame is non-linear, but it has 2 parts: Preparation and Implementation part. The building block of Ambition and Accountability centrally related to each other. Each 'Building block' has added value for communication effectiveness. One of its principles is no smart objectives, but inspiring Ambitions are the basis for color choices. Explicit Accountability that suits Ambition is the heart of the model. It is Adjustable at any time in a suitable situation. It has also extra value compared with a normal Communication Plan – positive starting points are always the key values and the ambitions, with accountability as a sustainability challenge. The action plan will always be based on positive opportunities.

2.2. System Theory

On other essential point is system theory. Authors like James Grunig & Hunt, Cutlip & Center, Dozier, and Broom develop system theory in the field of public relation. The system mainly focuses on Management, Excellence, Effectively, Stakeholders, as well as Effective roles of PR. According to their point of view Organization has System with Subsystems of Production, Human Resources, Maintenance, Disposal, and Management. Accordingly organization goes through four elements of system theory such as Input / Throughput / Output / Feedback. Each element is always the in process of making organization effective. On the other hand organizations are effective when they choose and achieve goals that are important to their self-interest as well as to the interests of strategic publics in their environment (Grunig, Grunig & Ehling, 1992).

Although integrated Public Relation function it means a mechanism for coordination organization communication authorized by one department or PR. Public relation has put its contribution in collecting and interpreting information from social environment. Communicate on behave of the

organization to accomplish stated objectives. Therefore, must be developing strategic plan, facilitating Communication, solving Problems, Participating in management developing strategic policy. Finally Check and Control the overall organizational performance (Ihen & verhoeven, 2009; 2012).

This theory is categorized into two such as closed system and Open system. Closed system is reactive means of relationships. It is has one way communication direction from management or CEO to the employee's formal or informally direction. The success of the organization is measured by output rather than work results. Whereas Open system is Proactive role in changes, research and monitoring system. It influences both the organization and its environment (Grunig & Repper, 1992).

Similarly Katherine Miller on his book of organizational communication point out human bodies are composed of a number of systems such as cardiovascular system, the digestive system, the neurological system, and so on. In turn, these systems are also made up of subsystems for example; the cardiovascular system includes the heart, lungs, and blood vessels (Miller, 2012). We can see organizations as systems adapted to accomplishing objectives. Let me took hospitals as an organizational system. A hospital consists of a number of departmental sub systems, including surgical nits, recovery units, the emergency room, laboratories, and offices. These sub systems, in turn, are composed of smaller work groups and individuals. Therefore, communication is a system to create organization image in mind of audience. It is functional if working together with different internal and external stakeholders.

The other point is system work hierarch in ordering. The components of the human body must also be permeable to allow the flow of materials among organs and organ systems. In our hospital, we can also observe both system and component permeability. The hospital must be open to its larger environment so patients, information, and resources can move in to and out of the organization. Similarly, hospital units must be open to each other to facilitate the flow of people, information, and materials (Miller, 2012).

Therefore, organization open to the public as well as to the internal staffs to accomplished intended tasks. On the other hand organizations those who are in the process of producing good or delivering services should have a system to exchange information. Hence, the communication strategy of

organization those gives services are must be goes through the process of Input- throughput- Output and feedback process communication. We can take the case of Samsung C7 mobile phone as example. It has something wrong the production and burn made accident on users. The Company based on user's feedback collected the product and reform the system.

2.3 Social Theory

Social theorist like Cottle, Davis & Schlesinger focus on how public relation is beyond informing the publics. They are mentioned the following roles:

Media sociologists concerned public relations as sources and the media. Public relations have the role of scanning the environment to know what people believe and want and how they can be operated. Public relation should be done a research to fill public interest and transform the society into modern and democratic situation (Cottle, 2003; Davis, 2002; Schlesinger, 1990:58).

Social theory is necessary to describe, understand, and explain what happens to whom in the realm of strategic communication and with what consequences (Ihlen & Verhoeven, 2009). A research perspectives building on social theory will recognize strategic communication in itself is not good or bad but can be used for good or bad purpose (Ihlen and Verhoeven, 2009; 2012). On the other hand Modern society of today increasingly is not only maintained by communication, but it is actually constituted by it. Strategic communication and public relations are therefore closely related to modernity, especially in the economic context of commercial and administrative organizations (Ihlen and Verhoeven, 2009; 2012).Hence, to eradicate or minimize disease burden systematic approaches of communication is mandatory. Interest of the community scanned and used as baseline to determine our means of communication as the sometime select appropriate communication tools.

2.4. Publics as Relationship Management

The concept of publics as relationship management is categorized the publics as Active and Passive publics. Basically public are identified as All-issue public, Apathetic public, Single-issue public, Hot-issue public, Latent publics and Aware publics (Grunig & Repper). These categories still applicable in social science field of study. In contrast, due to globalization, terrorism, the emergency of internet and modernity liquid society was created globally. So people communicate with their benefits this being the case strategically communication is needed.

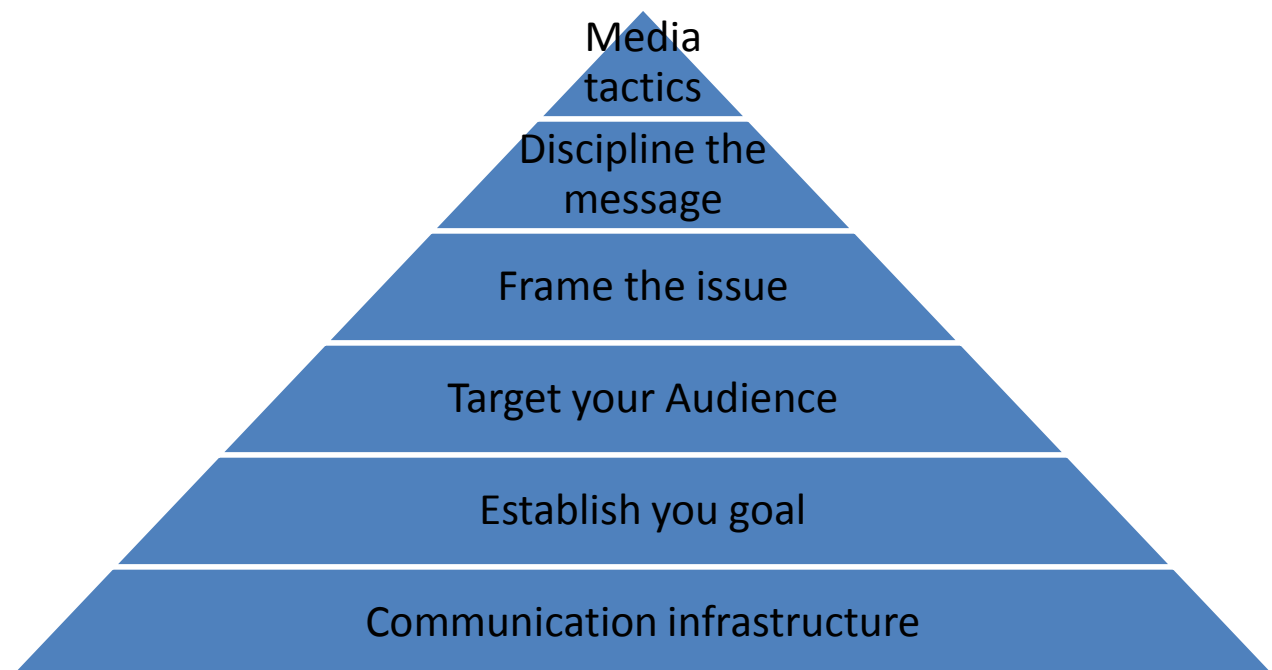
2.5 General Planning of Strategy

Strategic communication planning is the process of connecting the organization to employees, clients, and stakeholders in identifying Content of the relation. An organizational position in the public sphere may also briefly mention. Case preparation: Short term, Medium term or Long term. Separate characteristics of relationships for internal and external stakeholders. Determine the style of relating. Is it open or closed, dialogue or hierarchy or conversational? You must be deciding. Avoid hobbyist. Be capable to explain the relation with vision and ambition. Make strategic choices understandable to inspiring and clear language use (Cornelissen, 2014).

2.5.1 Setting up a Strategic Communication Plan

Effective communication requires strategic plans in order to approach our subject groups and bring intended knowledge, attitude and behavior. Vos, Otte and Linders are stated a stage of setting up a strategic communication plans as follows:

Clear objectives, intended goal, approaches of communication, subject group's analysis and research of our audience and identified instrument that help us to reach our target group. The target group segmented based up on demography, socio-economics, characteristics, media they use, feasibility and accessibility of message must be taken inconsideration (Otte, J. ,Vos, M. and Linders, P. 2003). Similarly SPIN project stated strategic communications planning pyramid with six stages:



Org Strategic Communication Planning hand book.

2.5.2 Modernity Theory

As strategic communication theorists like Falkheimer and Heide (2004) claim that Society is the product of human being its habits are acted made of routines for one or more persons. Initially, these acts are constructed rationally but soon they are made non-reflective practices. As time passes and the habits are spread in institutions, action systems that influence social systems are constructed. In combination with other institutions, society is created with a relationship to others (falkheimer and heide, 2004). They also tried to elaborate as the following how society's knowledge, attitude and behaviors are created:

Society as objective reality: This means that institutions are legitimized through a process which leads to an objectification of their presence and relations to the environment. Human beings are social products: This statement shifts focus to the individual and his or her socialization of norms and actions. Families are primary socialization agents while social institutions are secondary agents that are influenced by public relations processes (falkheimer and heide, 2004: 12).

In these local and everyday encounters between human beings meaning is constructed and acted upon face-to-face interaction. The interaction is based on language and the aim is to achieve mutual understanding. Social relations are the core of human existence (Ruler, 2007:107).

2.5.3 Relationships Theory

Systems theory which evaluates relationships and structure as they relate to the whole: Situational theory: whereby situations define relationships. Approaches to conflicts resolution, which include separating people from the problem; focusing on interests, not positions; inventing options for mutual gain; and insisting on objective criteria look (Weintraub, E. Bruce & Pinkleton, 2008)

2.5.4 Strategic Communication Theory

Sustainable Production and Innovation project working on migrant strategic communication. As they define strategic communications plan has the power to transform an organization in terms of working together as a team to achieve organizational mission and vision as well as enhancing credibility and status of an organization (<http://www.spinproject.org>).

As we observed now a day's globally Organizations are increasingly challenged by activist groups, politicians, terrorist group, security, communities and individuals, health and safety, environment and public concern. 'The angry citizen' syndrome' and 'consequence of modernity' are creates risk society." Therefore, strategies are the most appropriate for dealing with those bottlenecks (Grune, 2010).

Hence, to communicate for social development well-designed and well-managed communication activities can contribute significantly to creating awareness, and increasing knowledge, understanding, attitude and change behavior of our client (Teffer, 2008).

"Communication professionals like Heath claim that Strategic communication is not about making organization more effective but making society effective." Public relations are working how organizational values are visible in behavior and implementation (Heath, 2007:220). Even if organizational attractiveness is determined by it communication strategy; we would like to see its accountability and transparency. Organizations are characterized by its unique value that everybody is governed by it. It is not enough only writing of them but they would give meaning, spirit, synergy and visualized.

2.6. Health Communication Strategy

The other point is Health communication strategy how much it has been able to increase the audience's knowledge (Sewasew, 2014). Hence, in public relation theory two- way symmetric communication can help to know the level of audience knowledge through feedback.

As Federal ministry of health national health communication strategy guides any published or produced health communication material should be establish based on scientific theory, research and environmental based(FMOH, 2016/17). The characteristics of Social behavioral communication strategy have: participatory, planned, and integrated and research based communication. It also follows the following inclusive theoretical model:

Advocacy: it used to raise political leader's commitment to assign valuable materials.

Social mobilization: mobilizing a large number of communities to enhance their ownership.

Behavioral change: focus on specific target group, individual's knowledge and attitudes (FMOH, 2016/17).

2.6.1. Health Communication Models

According to national health communication strategy ... “health behavior related factors significantly contribute to the poor progress in the control and prevention” (FMOH, 2004). Many of health communication theories focus on why and how people change their behavior. Environment can enforce the people the way of thinking and understanding the situation.

It also advocate the need of the development of the strategy is not restricted at national level regional health bureau can develop their strategy of communication based up their situation (FMOH, 2004). In this case the city can develop their own communication strategy based on their environment.

The following health communication models are selected by federal ministry of health use both at national and regional level:

Health belief model: according to this theoretical model is individual’s action directly affected people’s health, if they are not known as they are exposed to health problems.

Tran’s theoretical model: in this model the long –term effect on health behavior is constantly recurring in habits and action.

Social cognitive theory: This theory described the health behavior of people in three ways: 1, continuous interaction between individuals in the dynamics of change, Interdependence and Behavior. All of them are focus on human inventive and emotion change mainly applied to prevention and control of disease.

Diffusion of Innovative: how to explain quickly a new idea and technology to the community.

Social ecological model: it is important to understand the psychological effects of the person’s characteristic and to develop a successful program in socially enthusiasm (FMOH, 2016/17).

Nepal is a country which used to have very high maternal and infant mortality rates. However, they develop strategy and establish communication center. Their communication strategies address safe motherhood and newborn health. That can sent out information a way that they easily understood (Ibid).

Health communication strategy had been created linkage and harmony between different department and stakeholders (FMOH, 2004). It requires the engagement of different sectors and experts such as health professionals, communication experts, media, researcher and advocators (FMOH, 2004). Addis Ababa has huge risk of health at the sometime opportunity to change the community in health keeping behavior through communication. But, one of the biggest obstacles to the effective use of communication was thinking about communication too narrow manner (Teffer, 2008:6)

According to Addis Ababa City Administration Health Bureau first quarter report shows from the total pregnancy 8 % is teenage pregnancy. This implies that a teenager seems did not bothered about HIV/AIDS (AAHB, 2018).

Communicating with key audiences of health decision- makers is essential for gaining valuable support. They are agents who use health communications products to make a range of health decisions such as:

Individuals, families, Health care providers, patients, Policy-makers, Communities, International organizations, stakeholders and programs coordinator, human and financial resources, and they are incorporated (AAHB, 2017)

“Health communication is “audience center” it needs understanding of the society and involvement of the community to bring intended health behavior” (Demeke, 2013:45).Public service announcement and health literacy also signify throughout the history nations have used various means to preserve their well-being and continuity as generation.

2.6.2. Principles for Effective Health Communication

According to federal ministry of health; health education, advocacy and community mobilization part one health extension program module there are six principles to ensure Health communications are:

- accessible
- actionable
- credible and trusted
- relevant
- timely
- Understandable (FMOH, 2016)

2.6.3. Theories of Cognition and Behavior

Cognition and behavior communication theory is abroad concept but we will discuss few theoretical point of view:

1. **Action assembly theory** is an aid to understanding behavior by understanding how people think.
2. **Social exchange theory** aims to predict behavior of groups and individuals based on perceived rewards and costs.
3. **Diffusion theory**, whereby people adopt an important idea or innovation after going through five discrete steps: **awareness, interest, evaluation, trial and adoption.**
4. **Social learning theory**, whereby people use information processing to explain and predict behavior (FMOH, 2016)
5. An elaborated likelihood model, which suggests that decision making, is influenced through repetition, rewards and credible spokespersons.

2.7. Theories of Mass Communication

There are a lot of mass communication theories nowadays. But the relation to this study, we have seen the gratification and Agenda-setting theory concept.

Uses and gratification theory: People are active users of media and select media based on their gratification for them. In this theory communication is audience center approaches to understand mass communication. Audience analysis based on their priorities, media types they used, time, issues which are directly related to their life. Appropriately selecting is essential.

Agenda-setting theory – suggests that media content that people read, see and listen to sets the agenda for society's discussion and interaction. Agenda setting is a strong media effect that says that there are three related agenda, media agenda, public agenda, and policy agenda. They are linked with one another (Naveed, 2017). Some health issued need the active participation of community, stakeholders, and influential bodies, the media, and political leaders. Therefore, make agendas to the concern of different people.

2.7.1 Concerns and Issue: Power and Language

Since the rise of mainstream media and computer communication is used, communication is formed as mediated social arena. But nowadays meaning construction takes place and materializes in the interplay between the old media and the new social media systems often on global scale (Ihlen and Verhoeven, 2009; 2012).

Strategic communication can be seen as different forms of communication, ranging from symbolic, interpersonal and social communication to the non-personal communication functioning system theory. It is possible to distinguish between mediated and non-mediated communication on the micro, meso, and macro levels. Public relations role in a society is to create and/or re-create the condition enact civil society (Taylor, 2010:7).

The study of social theory argues that society today has decrease a sense of community. Despite technological development and the new media, and in fact partly because of them, people today have fewer interpersonal relationships than ever before. There has been a generational shift, and people have become isolated they no longer belong to clubs and associations or do things together, but instead they even bowl alone. Putnam also argues that people today have lost a sense of community, which makes collaboration and relationships difficult to establish and maintain. (Putnam,2000:232).

2.7.2 Social Media as a Powerful Tool

International study conducted on new media for a new future the emerging digital landscape for a planetary society reveals that:

Digital world people gain unbelievable energy in communication and mobilization efforts. Internet helps to increase speed, reach and effectiveness of social momentum. Peoples who has similar stands about the politics, environmental issue, fundraising for a charity, entertainment, education and global perspectives they are easily coordinated through social media and made actions. Globally more than 3 billion people has used internet. Within five years five billion people might have used internet. This means majority people of our planet use internet (Milton, and Kingsley: 13)

They also carried out the revolution in social media is vital for development our collective imagination and for building a collective consensus affirming that it is important for us to connect and communicate (Milton, and Kingsley).

2.8. Summary

Theoreticians develop scientific theories in different angles. Mainly in social science field study they tried to enhance life of human beings. Public relation is part of social science field of study primarily focus on human relation. It is multi-disciplinary field of study. Hence, it is better to see different literarily works related to the problem to be studied. Therefore, in this paper the researcher cited different scholar's theoretical point of view. Did not saying that they are absolutely right or wrong it depends on the actual situation? Even if a lot of variables that hinder to change in practice, at list it is better to know them. Though it may use in our situation. In the context of our country it is advisable to use two way asymmetric communications in line with values, culture and religion of the community.

In this particular study tends to state same theoretical assumption that will applicable easily. Mainly focus on audience segmentation for different health issues, models of communication, focused and purposeful health communication strategy that will meet the need of publics as well as the organization.

Chapter Three

Research Methodology

Introduction

The purpose of this study is analyzing integrated, operational, strategic communication executed by the regional health bureau at Arada and Cherkos sub-urban centers. Here, the word strategy is fixed as a road map of specific activities that reached on intended goals. Looking for an understanding of a responsible body strategic health communication, implementation is the intent of the subject.

Qualitative research uses several techniques that are interactive and humanistic. “Methodology is a scheme or plan of action that links methods to outcome... govern our choice and use methods”(Creswell, 2014). The researcher used qualitative methods of inquiry. Individual in-depth interview and focus group discussion techniques of data collection were employed.

Semi-structured, open-ended interview questions were developed to gain reliable, detailed information about health communication strategic implementation. It also offered an opportunity to listen carefully to what our subjects were saying.

3.1 Research Design

According to Bryman (2004) “A research design provides a framework for a collection of information. Accordingly, in this qualitative research data were collected through in-depth interview and FGD. Informal discussion was also made to cross check the findings. Participants of the study were talking openly about the topic without the usage of formal specific questions. Data was compiled through a recorded voice of participants and text information in a same case. The written report was mainly used triangulating technique in order to minimize a single method gaps. The employed triangulation method to cross check the findings.

Several methods of data collection involved and subjects are actively participating in the study. A small number of subjects have been an opportunity of extensive and prolonged engagement to reach on the main problem of the subject area (Creswell, 2014). Furthermore, since this study fully

employed qualitative research method as a research strategy and interpretive. The researcher also used various data collection techniques to the validity of the data.

3.2. Data Collection instruments

The inquiry was used in several forms of data collection techniques. The primary source of data was collected through in-depth interviews and Focus group discussions. Print and produced documents such as leaflet, Poster, Billboard, Audio, visual and Internet messages were examined in terms of content, accessibility, and methods of the convincing audience starting from the year 2009 up 2011 EFY.

3.2.1 In-depth individual interview

“Qualitative researchers seek to understand the context or setting of the participants through visiting this context and gathering information personally” (Creswell, 2014). Accordingly, Key informants of the study are Addis Ababa City Administration, Health Bureau department of public relations professionals, urban health extension and primary health care team, particularly IEC/BCC health professional, under Addis Ababa Health Bureau two sub city health office IEC/BCC professionals were also part of the subject. Namely Arada and Cherkos sub-city. Similarly, Gulale sub city Hidase health center health extension worker was selected purposely for an in-depth individual interview. This health center was became the first on annual performance in 2018. The criteria to be selected target sample respondents are individuals who are directly responsible in coordinating, facilitating and working on IEC/BCC as well as those who are on job of public relation and communication area are involved in the study.

An in-depth individual interview data collection technique was attempted at Addis Ababa Health Bureau three health professionals are working in title with IEC/BCC. Similarly, five public relations officers are on the job. Under ten sub cities at least ten IEC/BCC health professional or focal person is delegated. Consequently, including urban health extension, the total population of an individual's in-depth interviewees is 22 in number. From a 22 in-depth interview target population, the researcher selected 11 representatives sample population. The criteria of selection were a direct relation to the subjects of the study. The equal distribution of sample taking techniques was applied. Semi-structured eleven central and associate interview questions were used to provide detailed

information about urban health communication of the municipality. The questions are categorized into three based on job responsibility and researched sites.

3.2.2. Focus group discussion (FGDs)

The major advantage of FGD in data collection is that it offers a large number of data within a short period. Hence, the value in using this method was a help to provide and triangulate data. Two homogeneous Focus group discussions were carried away. The group organized by categorizing respondents logically into two groups. Each group consists of six to eight respondents.

This method of data collection was undertaken on selected research sites, namely Arada and Cherkos sub-metropolis. The sites were selected through purposive sampling techniques. The criteria for selection are AACAHB top disease surveillance (close observation of a person or group) resulting. From each sub-city, eight Districts were randomly taken. For instance, in both sub-cities, there are 21 woredas; 16 of them are randomly selected which means 8 woredas from each sub cities such as woreda 01, 02, 03, 04, 05, 06, 07 &08 were selected. It was a fair distribution of sample sites.

Women development army chairpersons are participants of the discussion. The sample target population representative selection criteria are two years of working experience and taking health training and the ability to discuss in a group. They have knowledge and practice of different District therefore, they are appropriate to the problem being studied. Accordingly, from 1,557 women development army of the two sub-cities and 21 Districts, the researcher took 16 respondents from 16 different districts. Five general open-ended semi-structured discussion questions undertaken to draw out the views and opinions of the respondents. Interview questions were translated in the Amharic language. The researcher was the moderator of the discussion.

3.3. Qualitative Methods

Research can be categorized into three methods such as quantitative, qualitative and mixed research methods. Each of them has their own techniques of data collection and analysis (Creswell, 2014).

The main reason of using qualitative approach due to the nature of this study ‘‘Qualitative methods use multiple techniques of data collection that are interactive and humanistic’’ (Creswell, 2014).

Therefore, I have so many reasons to use qualitative method. Because qualitative method takes place in natural setting, regularly goes to the site of participants, enables to in detail about the problem, actual experience of the participants will be undertaken and the researcher has a chance to learn what to ask, whom to ask, how to ask and learn central phenomena of interest.

The other reason to use qualitative method is help to view social phenomena ‘holistically’ more complex interactive and multi aspect reasoning data analysis. Therefore, able to learn how translate visual models, emotions, facial expressions, motives, working environment and experience of subjects (Creswell, 2014). Generally, it helps as look from different perspectives. ”Moreover, since this study entirely employed qualitative research method, as a research strategy, it is inductive, constructive and interpretive (Creswell, 2014).

3.4. Sampling Techniques and size

Addis Ababa has ten sub-cities and 116 Districts were structured administratively. Under the regional health bureau, ten sub-city health offices are constituted. All sub-cities Health Offices have at least one information, education, and communication officer or focal person. As a result, currently, the total health information, education and communication officers or focal persons are ten. Including the regional health bureau, the figures of communication professionals are 22.

The study used a purposive sampling technique. Respondents and study areas were selected purposively. The study areas are the Regional health bureau as well as Arada and cherkos sub-cities Health Offices. The Regional health bureau health promotion, disease prevention and control directorate deputy head, department of public relations leader and public relations officers as well as urban health extension and women development army chairperson are key respondents of the study. Also, the two sub-cities information, education and communication/behavioral change communication officers or focal persons are taken as a sample.

Consequently, the researcher used 11 key sample representatives for an in-depth individual interview. All target representatives selected purposively. The selection criteria for all sample respondents are job responsibility and the familiarity of the title of the study. Similarly, research sites were selected based on AAHB surveillance of the top ten disease reports result. According to,

the surveillance report both Sub-cities is characterized by a high tendency of Cholera, poor sanitation, slum area and below the standard housing relatively.

On the other hand women, development army chairpersons of eight districts are taken for FGD. A single women development army has a maximum of 25 up to 30 members. They engaged in, supporting health promotion and disease prevention activities at the household level. Thus, from 21 districts 16 representative's districts were randomly taken. Women development army chairpersons are sample representativeness of the study.

Generally, the total population of the study is 1,579. Of the 1,579 total populations, 27 samples were used. The Qualitative investigation with a few sample representatives cover a large population through detailed data collection techniques. Selected informants are those involved in the discipline of communication, coordinating and organizing health communication of the study area. All respondents have a direct relation to the issue being studied. A secondary source of data logically organized. The finding of document analysis, transcribed descriptively.

3.5. A Brief Profile of Research Locations

As AAHB emergence surveillance data indicates Arada and Kirkos sub cities are venerable in communicable disease such as cholera, tuberculosis and HIV/AIDS (AAHB, 2010). Overcrowded population distribution, poor waste disposal mechanism and housing conditions are the major criteria to be selected the sites.

3.6. Data Analysis and Interpretation Techniques

Collected interview data were organized categorically based upon the subjects of the research objectives. It would be structured from more generic to specific data interpretation. Interviews were also recorded. Texts, graphic and symbolic data are transcribed into text. Reality and meaning constructed by triangulating the different sources of data to verify the validity. Data regularly reviewed logically organizing similar topics together. The primary source of data interpreted descriptively.

Focus group discussion point analyzed in a group and transcribe based on a prioritized major point of the research. Published documents analyzed in format, content, design, and quality. The new

media such as internet is entirely analyzed by its accessibility, content, methods of communication and quality. A secondary source of data, analysis interpreted in descriptive form. Finally, the three samples collected results triangulated to complement each other.

3.7. Data Recording Procedures

Interview data recorded through personal mobile with high quality. The record is not more than 45 minutes. Interviewer should be ethical consent from targeted subjects of the study. Site observation data would be gathered by taking notes and capturing photo. Published documents and new media's will be regularly scanned.

Published and produced selected sample material had been selected by the years of publication and production. For example, from 2009 up 2011 E.C published and produced materials incorporate in the study. Because, the minimum years of strategic plan implementation require 3 or 5 years. Hopefully the researcher kept ethical procedure from the beginning at the end of the study.

3.8. Ethical consideration

The investigator was describing collected data by using words of respondents as it is. The researcher will be use indentation or other special formatting. It well also describe by using the first person singular and plural pronouns.

The researcher has five years public relation working experience as well as five years teaching experience. In my point view Addis Ababa has unique characteristics in nature. Therefore, to bring intended positive health behaviors; it is better to communicate strategically. To gain entry the researcher submit approval letter to Addis Ababa Health Bureau and discuss on the process. Addis Ababa Health Bureau wrote permission latter to sub cities health Offices. I also asked to gate access of observing and conducting interview at Arada, and Kirkos Sub-City urban health communication officers, women development army and health extension worker.

3.9. Challenges faced during data collection

Senior public relation informant was not available. Arada sub city IEC/BCC officer is newly assigned personnel he has no adequate information about past experience of working situation. In addition, he hasn't taken on a job training regarding the standard of health education materials. The former health education officer joins another organization. Sometimes Sub city health office

information, education and communication officer engaged in routine activities. At the other time they were at meetings outside the city. Therefore, getting them caused time constraints. Therefore, time constraint was the big challenges. Finally, to fill the gap the researcher looks another suitable time and modifies the time schedule through telephone conversations.

An instrument of data collection can be measures the validity of data. Because has an opportunity to ask additional questions to make clarity. On the other hand, expression, emotion and feelings of interviewee can help to construct meaning. Respondents of the study were selected with similar criteria as the study sample. Until having key respondents the researcher document analysis and FGD part were undertaken. Hence, all target respondents are interviewed and discussion was also undertaken. Therefore, the challenge does not have any influence on the finding.

3.10. Summary

In this chapter appropriate data collection techniques were incorporated in the research design and as a result, it was made significant contribution in quality data collection process. It also made possible contribution to answer central and associate research questions raised in the study

The study used various data collection techniques to ensure reliable information. The researcher approved reliability and validity of data quality through triangulating logically the various data collection instrument results. The researcher also measure data quality through on daily basis involvement on health communication material development. The study employed Qualitative research methodology due to the nature of the title being studied. In this regard the methods provide a chance to exploit detail information about the problem and help to know the actual setting of the study area. It also helps us make a strong relationship with IEC/BCC health professional to discuss freely and openly. Furthermore, it helps to reach a reliable finding.

Finally the research carried out challenges the inquiry face during data collection and an action taken to overcome an expected challenges are listed out.

Chapter Four

Presentation and Analysis Data

Introduction

In this chapter an attempt is made to present and analyze the collected data relating to the theories discussed in the related literature part. The collected data logically interpreted. Respondents are coded as stated under chapter one, the main objective of this study is assessing urban health strategic communications of AAHB utilized to improve health status of the community.

The research triangulated the finding from the knowledge, attitude and attention given to the city health communication perspective of in the context of Addis Ababa. Moreover, the findings are discussed based on the objectives and research questions set out.

Accordingly, five overarching themes have been identified based on research questions and data gathered from the field. Themes are arranged in the manner that the preceding themes develop as the following:

4.1 Data from interview

About Knowledge of health communication strategy

Knowledge is very essential to complete intended tasks timely, effectively and efficiently. Well, educated health communication professionals are mandatory to achieve the objectives of the organization. Health is a very sensitive area. In every health program, communication is undertaken. Doctors with doctors in case of treatment given to patients were put on patient history files, health professionals with management. Vertically as well as horizontally or formal and informal communication is employed in health institutes. But, the core point is how to communicate strategically to our clients? Knowledge is usually needed but it is not enough it's own for individuals or groups to change their behavior (MOH, 2016). But, the core point is how to communicate strategically to our clients?

Respondent one:

Messages are transcribed into clear, understandable, readable, audible and visible manner.

But our practice should be changed. Need assessment is to be undertaken before only

messages are developed. The pilot test is should be carried out. Sametimes our messages are not clear these phenomena lead as to misunderstand the message (deputy's head).

On the other hand the respondent, two and three explain luck of skilled manpower affect their communication. For example Cherkos sub city neither IEC/BCC nor focal person assigned. In the same way Arada Sub City information, education, and communication officer explain:

“Content analysis of education materials was employed by the team before publication. But, still gaps of knowledge how to develop print materials as well as audio and video materials” (IEC/BCC Officer).

Respondent Five:

“We can’t identify targets through conducting analysis at the grassroots level but, ideally, segregate target audience” (IEC/BCC focal person).

“Communication is an ongoing process in the context of strategy building, presenting, realizing, negotiating, rebuilding as well as implementation and testing decisions in the continuous loop” (Rule, 2017).

Therefore, the above fact implies that the organization has face effective communication knowledge gaps. It has the limitation of clear vision, mission and communication objectives. The question asked about usually used communication methods to create positive health behavior.

Respondent one:

“We prioritized interpersonal communication at household level through the structural arrangement. We are in the process of using again health education at the health facility. On the other hand, we are creating awareness through mass media, events, and conferences on different health days” (deputy's head)

Sub city and AAHB respondents have similar ideas. Additionally, they elaborate as they are in the process of employing and assigning focal persons at the health facility to reuse health education. But, according to HE, PHC and women development army described door to door health education has a lot of challenges. Majority of my respondent said the cooperation of the community is less.

“The communities do not have information about the services we are giving. They understood door to door health caring service wrongly. An awareness creation activity has limitation in the side of AAHB about PCH”(one of PHC team member).

Interpersonal communication is the interaction between two or more people. This form of communication can be face-to-face, two-way, verbal or non-verbal interaction, and includes the sharing of information and feelings between individuals or groups (MOH, 2016).

But most of the time this types of communication faced sensitive issues and ability to persuade the audience is a required skill. In contrast, the regional health bureau did not have skilled IEC/BCC professionals. As well as PHC teams did not have job training. The above point implies the organization did not analyze the position of it’s have in the society as well as in the staff.

About Target Audience identification

The question asked about ways to address health messages to different target group. Health communication should be audience specification and designed for particular target group of people. Before developing health messages we need to identify to whom it produced? To understand human behavior, we need to understand both individual and social contexts. We need to put ourselves in our audience’s shoes and see things from their point of view (FMOH. 2016).

Similarly, Van Ruler stated “who is the primary audience? – Meaning: Whose behavior do you want to change? Who is the secondary audience? – Meaning: Who will influence the behavior change of your primary audience? This means that different people may have different information needs. The other people may have different taste, values, world, views and preferences” (Ruler, 2014).

Respondent Four:

“Content analysis was done before any educational materials are published. Different departments were developing education material on the different health program. We analyze the content, topics, word, and expression in a team; otherwise, ideally identified our audience”(IEC/BCC Officer).

On the other hand respondent, five also explained that audience analysis initially begin from the diseases characteristics and the vulnerable group declared by WHO.

For instance, if we want to develop a brochure about cervical cancer, simple use scientifically confirmed age and sex group as a target (Respondent five).

The above fact implies that the Client side and program side audiences' analysis didn't undertake. Critical important audience segmentation variables like socio-demography, psychographic, geography, languages, and media they usually using was not taken into account.

The question asked about usually used communication tools.

Communication is an essential part of human life; all meaningful social interaction can be made through communication. There are also many more subtle ways of transferring facts, ideas, emotions, knowledge, attitudes, and skills to make informed decisions about their health. Human behavior can be complex so the effort to influence behavior towards good health practices important to understand different communication methods and characteristics of media (MOH, 2016:79).

In this regard all respondents described the organization used interpersonal communication and mass communication usually. Otherwise, mass communication such as campaign, conferences, events, electronic media television News coverage, permanent airtime program and print materials particularly brochure and poster.

Interpersonal communication can be face-to-face, two-way, verbal or non-verbal interaction and including the sharing of information and feelings between individuals and group (MOH, 2016).

The big challenge of interpersonal communication is urban health extension and women development army had got the political mission from the government. Therefore, it is difficult to make trustful relationships among the community. "In Addis Ababa, many people are working outside their village therefore; it is difficult getting them at home." On the other hand cooperation of the community is less. Interpersonal communication is more of verbal in this case sometimes goes out of topic. It needs the ability to manage discourse but, the PHC team did not get training so far. To convey information Comprehensive communication methods is not take in consideration.

About Mass communication

Mass communication is the mains of transmitting messages to a large segment of a population. Commonly say Electronic and print media. Broadcast Medias such as Television, radio, and the internet have the power to address a large audience. Whereas print Medias such as Newspapers,

magazines, leaflets, wall posters, banner, billboard, brochure, stickers, and annual journals have limited audience.

Respondent six:

“We use mainstream media as well as social media. We have a strong relationship with Addis TV. We have permanent television Airtime transmission different health issue. Additionally, events, health conferences and campaign usually used communication methods (AAHB, PR head).

On the other hand, at the sub-city level usually used print media such as brochure and leaflet as well as social media particularly Facebook.

“The other point is using different communication tools is important but in our sub city usually used print media like brochure and leaflets” (IEC/BCC focal person).

This implies even if they have various broadcast media access they only use some. For example, mass transport city Bus Television screen, LED, movable screen display, free telephone line and personal E-mail.

About Stakeholders Relationships

Respondent Two said:

Public relation mostly working on media relation and propagate government activities but IEC/BCC is doing how the community has health life behavior. On the other hand, non-governmental organizations support on health communication was limited (AAHB, HEO).

The organization identifies with whom we want to cooperate and develop a relationship? What is our story towards them? What do we want exactly (content)? How to realize it? Those questions will answer while making a relationship with stakeholders (Cornelissen, 2014).

The primary producers of health are “not health professionals” but ordinary people. The goal is not to “fight disease” but to enable people to “promote and protect their health. In this case families, individuals and communities are the primary producers of health (MOH, 2016).

Respondent six

The organization has a strong relationship with government and non-governmental organization especially fund raised institution at the regional health bureau level but, weak at sub city and district level. Women and Child Affairs, vital registration of death, Birth and wedding office, media, education bureau and food and medicine control Authority to some extent. But strengthening our relationship is very important (FGD participants).

Strategic communication is a process carried out with the active participation of stakeholders and beneficiaries that addresses a long-term vision and affects the causes of as well as the barriers to behavior and social change (MOH, 2016).

On the other hand (Hebermas, (2007) stated Communication approaches are how an organization relates itself to the public arena and to society at large whereas organizational and management approaches concerned with phenomena of organizational behavior and societal legitimacy.

The major gap is stakeholder's analysis is not carried out. Their relationships are in reserve for use when needed approaches. Did not Prioritized stakeholders base on their contribution? They don't know when, how and to what extent they make a relationship. They don't have a shared plan, clear vision, and shared objectives.

About Accessibility of health messages

The question asked about addressing health messages to some segment of target group

The organization most of the time used interpersonal communication and print media through its structural arrangement. Rarely use mass communication. It focuses more on informing the public about vaccination such as measles, polio, vitamin "A", cervical cancer, meningitis, and PMTCT. They usually used Addis Ababa Mass Media Agency or Addis Television, FM 96.3 Radio and "Addis Lisan" Newspaper particularly. This fact shows still some segmented of the audience didn't get health information. In this regard accessibility of health messages to all vulnerable population is the major gaps.

Respondent four and five said:

“Print materials such as brochure and leaflets are distributed to the health facility. It reached the community through health extension worker. Also, publicize on meeting and mass gathering. Media forum was created and health information was exchanging. It was helping to address large population” (IEC/BCC Professional).

On the other hand, health messages are transmitted on Addis television and FM 96.3 radio. The organization also used internet especially Facebook as a means of communication.

According to the federal ministry of health, health education, advocacy and community mobilization part one health extension program module stated there are six principles to ensure Health communications elements are: accessibility, actionable, credibility and trust, relevance, timely, easily Understandable (FMOH, 2016).

The above fact implies some segment of people did not get health information. The other group people watch or listen in relevant or needless information due to audience specification problem.

About Urban health strategic communication requirement

Regarding the requirement of urban health strategic communication, all respondents are agreed on Addis Ababa has their own unique characteristics. Therefore, the city required a city basis health communication strategy:

Respondent three:

“City basis health communication strategy is very essential to eradicate the higher consumption of alcohol, chat, smoking, and unsafe sexual intercourse practice. In addition, illegally selling poor quality goods and products, food and drink adulteration, low physical exercise habit and low practice of nutritional diets, car accidents and so on are the major health problems of the city will be changed.”

In addition to that, the city has a diversified population. They have also various communication outlets in the city for instance; internet access, broadcast and print media, social gathering and moveable communication channels.

Systems theory support the idea “organizations are effective when they choose and achieve goals that are important to their self-interest as well as to the interests of strategic publics in their environment” (Grunig, Grunig & Ehling, 1992). This implies that the organization ignore the needs of the real environment and the community media exposure.

About Attention given to urban health communication

Communication is primarily prevention tools of health problems (MOH, 2016). In this regard they do not pay attention.

Respondent One;

I don't think that urban health communication didn't pay attentions far but strengthening is needed. Now a day's we give priority to the field of communication. So, capacitating department of public relation and urban health extension and primary health care teams is important (deputy bureau head).

Similarly, two respondents supporting the idea of now paid attention to urban health communication but, there have limitations communication budget. In contrast, PHC and urban health extension workers say still doesn't pay attention to IEC/BCC in the ground level.

On the other hand one of interviewed explains “I think public relation Officers forgot their role. Sometimes because they disseminating political issues and get information out of the public the people mistrusted on them” (PR officer).

“Public relations are working how organizational values are visible in behavior and implementation” (Heath, 2007:220). In contrast according to Habermas communication process pass through the following validity claims trust (talk about something which the partner also accepts exists), truthfulness (being honest and not misleading the partner) and legitimacy (acting in accordance with the mutually accepted value and norms).

Respondent Seven:

“Supervisors who came from Addis Ababa Health Bureau and sub-city health Office has different checklist of evaluation for the same task. They need PHC report as well as health

Extension report separately; but both are functioning the something” (health extension worker).

4.2 Data from Focus Group Discussion

About Stakeholders Relationships

Both focus group discussion participants confirm regarding the question asked the relationship with different stakeholders. They said to communicate effectively and efficiently Health extension and primary health care program playing a significant role in producing, disseminating health materials through the structural arrangement of the organization.

The question asked about usually used communication tools. The two focus group discussion is as the following

Group A

Interpersonal communication and traditional coffee ceremony discussion platform were structurally arranged. Health extension, PHC team and women development armies are driving force of health communication at household level.

Group A& B

“Sometimes the community asked a lot of question that is beyond our obligation. Especially People who have the low income needed our support asked a lot of questions for example, toilet sucking vehicle services, and liquid waste disposal drainage. If you don’t consider their emotion they loss trust on you and ignore your relationship” (FGD participants).

The organization want to allow the community to take the leading place on health initiatives although make a relationship with different stakeholders. Bothe group A & B, focus group discussion participants argued that:

Group A& B

The organization has weak relationship at the sub city and district level. Women and Child Affairs, vital registration of death, Birth and wedding office, media, education

bureau and food and medicine control Authority to some extent. But strengthening the relationship is very important (FGD participants).

In contrast, the relationship between the departments with the department is weak at AAHB level. For instance department of Public Relation and Health Education and Communication Team has working separately.

About accessibility of messages

Group B

“One of my neighbors was going to the health center in a personal case. While she arrived there she got her friend at the health center. She asked her why she was there. Her friend told her as she comes to take measles vaccination. She heard information from her friends”(one of the participant)

About Attention given to urban health communication

“Now a day’s relatively regional health bureau and federal Police are pay attention for environmental sanitation, counseling, and treatment of a patient at the household level and security respectively. Due to the overall change process of our country the other sector bureaus are attention is slow”(Group “A”).

4.3 Document analysis

4.3.1 Leaflet

Different leaflet published by the city health bureau communication affairs with a variety of content. Published document concern what parents can do to have HIV/ AIDS-free generation. Majority of the leaflet is more of educational, informative and simply sending messages and not to persuade the reader and build a relationship. For instance, the leaflet published from 2017 up to 2019 talking about HIV/AIDS, cholera, Tuberculosis, measles, community-based health insurance, family planning, and family health in general. Rarely published administrative issues related topics like corruption, civil service proclamation and gender mainstreaming.

4.3.2 Poster

The organization published a different poster at different times in collaboration with NGOs. They are posted on health facilities. They published quality poster most of the time in-terms of Attractiveness but to some extent the content miss clarity. The language is full of Jergen or used medical term usually published in mixed Amharic and English language. Hence, sometimes doesn't know to whom it published.

4.3.3 Billboard

The organization rarely published billboard. It can use to transfer key messages with very attractive and easily understand slogans or says. It is relatively displayed for a long period. It produced with very expensive cost. The organization produced billboard on family planning. It used foreigner's photo. Husband and wife are with the newborn child. The picture is white person photo. It doesn't represent our community. It also displays near to the gets of Yeka, Samen, Addisu Gebeya and Akaki Kality health center. This implies that didn't visible to the large public.

4.3.4 Audio

The organization produced different Audio spots in advertisement and dramatic form. It focuses on HIV/AIDS, tuberculosis, safe motherhood, measles and polio vaccination. It consists of both informative and educational messages. It also includes an action necessarily undertaken to improve healthy life status of the family, people, and society. It also gives information about causes, Symptoms and a place where treatment is taken. But often use informative means of communication. It is simple and clear but it lacks attractiveness.

4.3.5 Audio Visual document

The organization produced audiovisual documents on different health themes. For example, Community Based Health Insurance and health facility delivery documentary film, Tuberculosis, HIV/AIDS prevention, etc. On the other hand, the organization has a Television airtime. The

program is on air once a week every Saturday at night after 2:00 hour's News time. The transmission duration is 20 minutes per week for a year. The subject areas of the broadcast are on prioritized health issues. In the same case, urgent issues and events covered by airtime. Content of the programs is selected by the organization. They negotiated about the Overall pre-condition.

The one of the gaps is a method of conveying information. It used more of informative or one-way communication techniques. "One –way information dissemination has to be exact, true and specific the main aim is to tell and not persuade" (Ralph Tench and Liz Yeoman). The other point is the proper media choice tactic. The problem of selecting media for our audience appropriately delivers our message. TV commercials messages transmitted using the City Administration logo to most often. The video is not incompatible. Most of the time audience exposure of media is not in consideration before health messages developed.

On the other hand, distracted serious health issues that are alcohol consumption, drug abuse, cigarette smoking, noise pollution, air pollution, glass lethargy, migration and health problems, and climate change are health problems that are not addressed.

4.3.6 Internet

The organization has a website address which is namely www.aahb.gov.et but it is not functional. It does not work. The new media like Facebook, twitter, and telegram were also created by the name of Addis Ababa health bureau. It was working. The Facebook of the organization has more than 7,000 followers. Update information was posted on a daily basis. Educational materials were also disseminating via social media. I have seen also job vacancy information, different disease infection, symptoms, treatment, and care posted. Nutrition content food items and its benefits also displayed. Different events like car-free road day events, training, and supervision and different health initiatives were also publicized. Health News is often posted. Administration issues were also realized.

4.4 Discussion

A healthy and productive citizen can be developed through an integrated health communication approach concerned with, culture, traditions and customs of the community. The aim of this study is identifying comprehensive, health communication strategic implementation knowledge gaps. Though many theories were raised in the literature review part of this study. The researcher primarily exploited strategically a communication the framework, system theories, and social theories were relevance in the context of the study area to form a theoretical framework.

Using multiple methods of data collection instrument was supported the validity of the study. Thus, in cooperation of the community is at household level, professional skill gaps, inaccessibility of information, low attention and lack of integrated operational communication plan are the major finding of the study.

But, accordingly system theory organization goes through four elements such as Input / Throughput / Output / Feedback. Each element is always the in process of making organization effective. On the other hand, organizations are effective when they choose and achieve goals that are important to their self-interest as well as to the interests of strategic publics in their environment (Grunig, Grunig & Ehling, 1992).

However, to communicate effectively to achieve organizational objectives organizational values are the translation of vision. Only to write them is not enough they give 'meaning', spirit, energy. The key values must be visible in behavior, style of advising, actions and leadership. Strategic communication implementation is a key factor to address health messages. On the other hand, prioritizing issues that are relevant for the effectiveness of the organization in the long run such as identifying trends and developments in the organization; views of internal staff and publics, trends or issues worried colleagues the most. Which trends developments issues are giving new challenging perspectives? Trends & developments are relevant from client, stakeholders and professional take into consideration during internal and external situation analysis should be in concenter (Ruler, 2014).

Chapter Five

Summary, Conclusion and Recommendation

5.1 Summary

In this chapter an attempt was made to describe the conclusion and recommendation of the study by investigating the problems of urban based health communications strategic implementation to improve the health status of the community. The study paid attention to the knowledge, quality, accuracy, accessibility of health information to the clients as well as need based health communication strategy of the municipality.

Investigate limitation of city based health communication, strategic implementation. The inquiry applied qualitative research investigation techniques. The major data collection instruments are an interpersonal in-depth interview and focus group discussion. To some extent the informal discussion was held at some point of view to exploiting the overall intention of organizational strategic communication as well as to confirm the validity of information. Published and produced documents analysis outcomes were incorporated in the findings. Social media outlets and adopted messages content analysis have been included,

The study confined itself at Addis Ababa Regional Health Bureau, Arada, and Cherkos Sub-cities health Offices. “The purposive sampling techniques were undertaken. 27 sample representatives were responded. Hence, the researcher reaches on the following finding:

5.2 Conclusion

Based on the finding the researcher has arrived at the following conclusion:

- The organization mainly used interpersonal communication through its structural arrangements. The major gap is many people are working outside their home and a number of people were also homeless, daily laborer, private and government employees. Therefore, it is difficult to reach those people through interpersonal communication. This implies that the city health communication strategy is inaccessible.
- Though the organization is also used mass communication. But the mass communication it used are more informative and educational. In some cases, print materials has been lack clarity, use medical terms, a mix of Amharic and English words and expression. On the other

hand, Billboard did not display in the place the majority of people can see. Need assessment, Pilot test, and target audiences analysis are not undertaken. Therefore, the organization unintentionally develops health information.

- Alcohol consumption, drug abuse, cigarette smoking, air pollution, noise pollution, mental health, road safety, human trafficking and environmental change are elapsed parts health. This implies that the communication strategy of the organization laid-back of the city context.

5.2 Recommendation

Based up on the finding of the study the following recommendations were made to alleviate city based health communication strategy related gaps.

- ❖ The term “strategy communication” indicates that not unintentionally communicating rather inherently plan to achieve organizational goal. Although it is impossible to imagine an organization without some sort of communication within it, i.e. hence, clear vision, inspiring Ambitions, value, shared objectives and proper communication tools are essential to enhance organization effectiveness. Therefore, it had better Purposeful communicating to advance organizational mission, vision and values by adopting urban health strategic communication to address health messages to target population.
- ❖ To ensure the quality, clarity, readability, accuracy, and accessibility of health the messages it had better health, education and innovation, information and public relations professional development to empower professionals by providing training.
- ❖ Many people working outside their home. The others have not exposure of watching television, reading Newspaper and listening radio. Internet users are also very few in number. In contrast, the city has various suitable cost effective communication channels but the organization uses only a few. Hence, it would be better to use city bus television screen, LED screen, movable LED, mobile games software, free telephone line, e-mail, door-to-door postal service, free software that used to top up health messages; Addis Ababa University Community media and regional educational media.
- ❖ It had better to identify Audiences based on their function Policy makers, Opinion leaders, Program managers, Health workers, Donor agencies form program side and Everyone,

Mothers, Mothers in law, Newly married couples, Adolescents and Pregnant women are also from client side identified.

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Appendixes

Appendix I

Checklist key informants in depth individual interview questions (for AAHB management, health communication officers and public relation officer)

- 1. Name**
2. Your responsibility in your organization
3. What is the role of health communication in health promotion and prevention?
4. How to identify potential health communication gaps in the city?
5. How to design health communication in a ways that everybody understood?
6. How to usually exchange information with the community?
7. Do you think that your organization have been provided adequate health information on non-communicable diseases?
8. How do evaluate health communication interventions with different profession?
9. Do you believe that the communication methods employed by AAHB are accessible to homeless, daily workers, street dwellers and especially able persons? How/Why?
10. How to advance organizational mission through communication? Why and/or how?
11. How your organization relates itself to the publics? Why is it important?
12. What do you recommend the implementation of health communication strategy of the city?

Appendix II

Checklist of key informants in depth individual interview guiding questions (for sub city health office IEC/BCC health professionals)

- 1. Name**
2. Your responsibility in your organization
3. How to develop health messages that help to modify life styles of the community?
4. How do you see the relationship of your organization with the existing environment?
5. Do you believe that the communication methods employed by AAHB are accessible to homeless, daily workers, street dwellers and especially able persons? How/Why?
6. Do you think that Addis Ababa require city basis health communication strategy? Why?
7. Do you think that your communication strategy is effective? Why or How?
8. What methods are usually used to exchange information? Why?
9. To what mechanism identify target audience?
10. How to evaluate the relationships you have with different department, stakeholders and media?
11. What do you recommend about the communication strategy implemented in your organization?

Appendix III

Checklist of focus group discussion key informants semi-structured open ended guiding questions (for women development army and urban health extension)

1. Name of participant
2. Responsibility
3. How to communicate with the community?
4. Do you believe that the communication methods employed by AAHB are accessible?
How?
5. What are the major health related problems in your locality? Why?
6. How evaluate acceptance of health information?
7. What do you recommend in dissemination of information?

Appendix IV

List of Key informants of communication coordinator, management and officers

No	Name	Sex	Organization	Position
1	Alemayehu Hunduma	Male	AAHB	Deputy head
2	Mulugeta Admassu	Male	AAHB	Communication affairs leader
3	Serkalem Melaku	Female	AAHB	Communication officer
4	Solomon Dressie	Male	AAHB	Urban health extension professional
5	Riesom Tsegahe	Male	Cherkos sub city health office	Health extension and primary health care service officer
6	Yosef Tefera	Male	Arada sub city health office	IEC/BCC professional
7	S/r Senait Amakele	Female	Gulale Sub city Hidasse health center	Health extension workers
8	Gedifey Semahegn	Male	AAHB	Website and face book administrator
9	Bikis Andarge	Male	AAHB	Achieve and documentation officer
10	Fikirte Terefe	Female	Cherkos sub city health office	Women development army
11	Etsegenet Abayneh	Female	Arada sub city health office	Women development army

Appendix V

List of Key informants of focus group discussion group “A” women development army

No	Name	Sex	Sub city	District	Position
1	SelamFekadu	Female	Cherkos	01	Women development army chairperson
2	Gete G/Yohannis	Female	Cherkos	02	Women development army chairperson
3	Genet Haile	Female	Cherkos	03	Women development army chairperson
4	Hasiat Aman	Female	Cherkos	04	Women development army chairperson
5	Shitu Delil	Female	Cherkos	05	Women development army chairperson
6	Hana Degu	Female	Cherkos	06	Women development army chairperson
7	Fehiwot Shiferhu	Female	Cherkos	07	Women development army chairperson
8	Aynalem Gizwu	Female	Cherkos	08	Women development army chairperson

Appendix VI

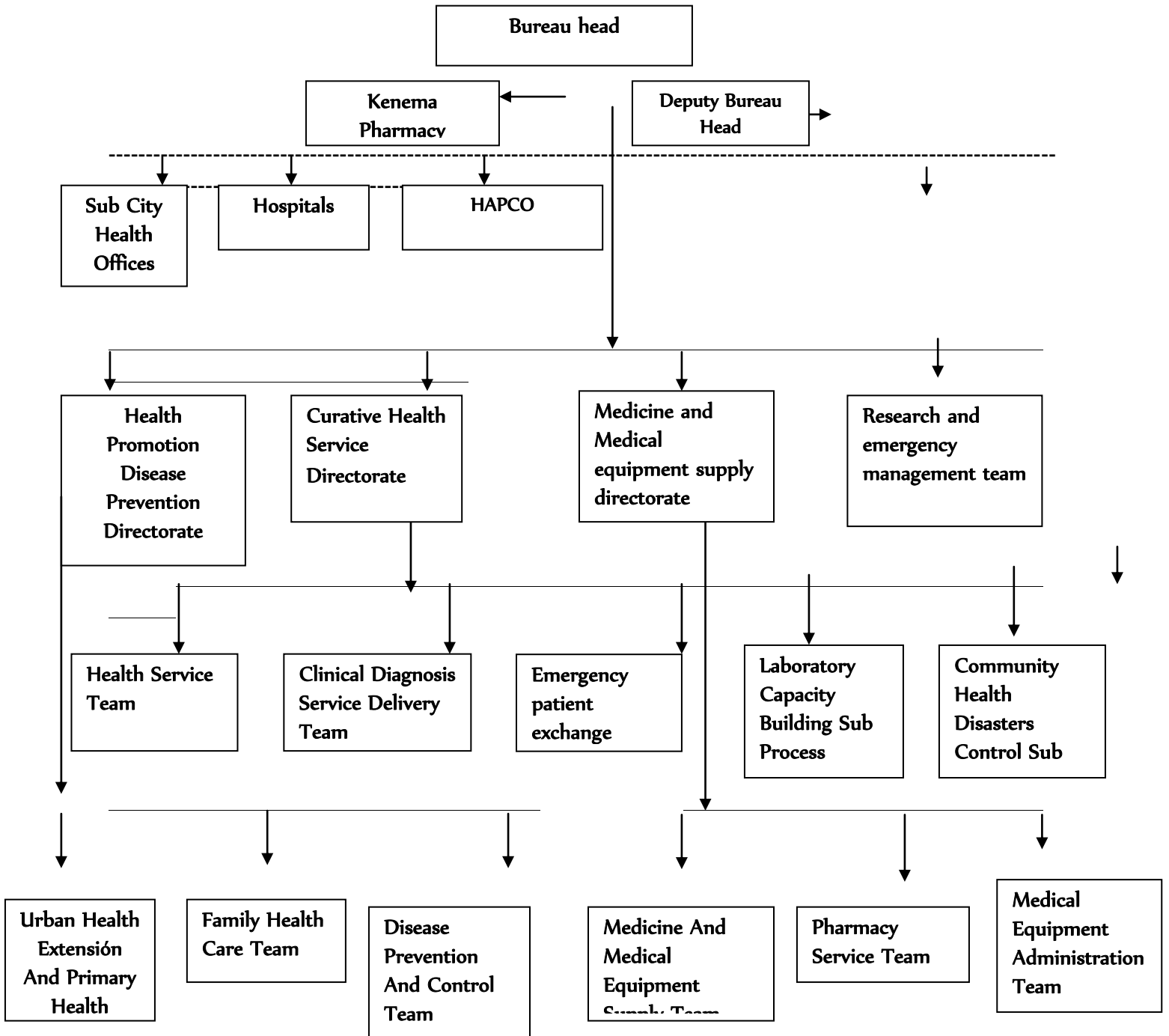
List of Key informants of focus group discussion group “B” women development army

No	Name	Sex	Sub city	District	Position
1	Fehiwot Fekadu	Female	Arada	01	Women development army chairperson
2	WudeTadesse	Female	Arada	02	Women development army chairperson
3	Mestawot Tadesse	Female	Arada	03	Women development army chairperson
4	Selamawit Shimelis	Female	Arada	04	Women development army chairperson
5	Asemu G/Maria	Female	Arada	05	Women development army chairperson
6	Tidist Genbere	Female	Arada	06	Women development army chairperson
7	Meron Habte	Female	Arada	07	Women development army chairperson
8	Zeze Ebrahim	female	Arada	08	Women development army chairperson

Appendix VII

Organography

Organizational Structure



Source: Addis Ababa Health Bureau BPR document 2011

Appendix VIII
Map of Addis Ababa Sub Cities

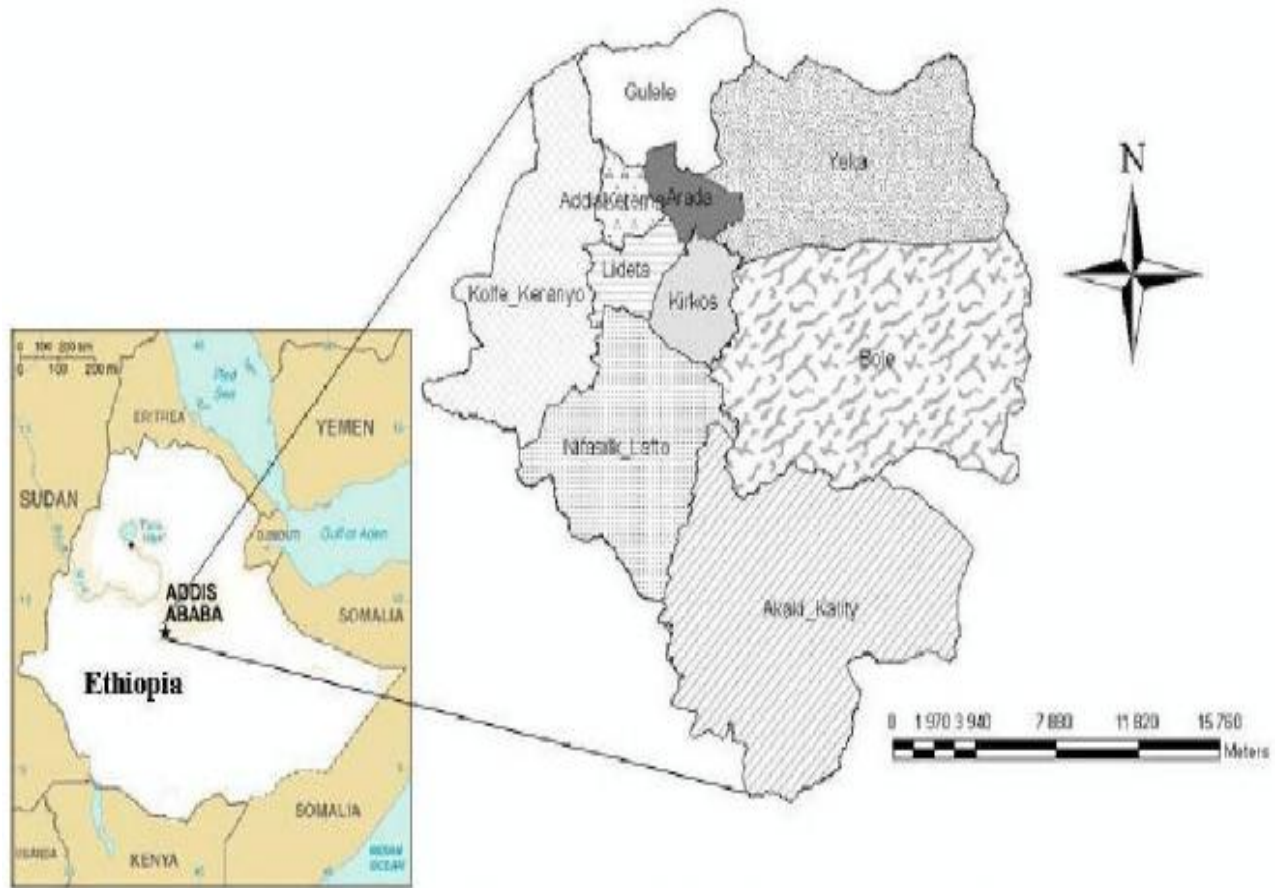


Addis Ababa
by Sub-city

Source: www.Aaca.com

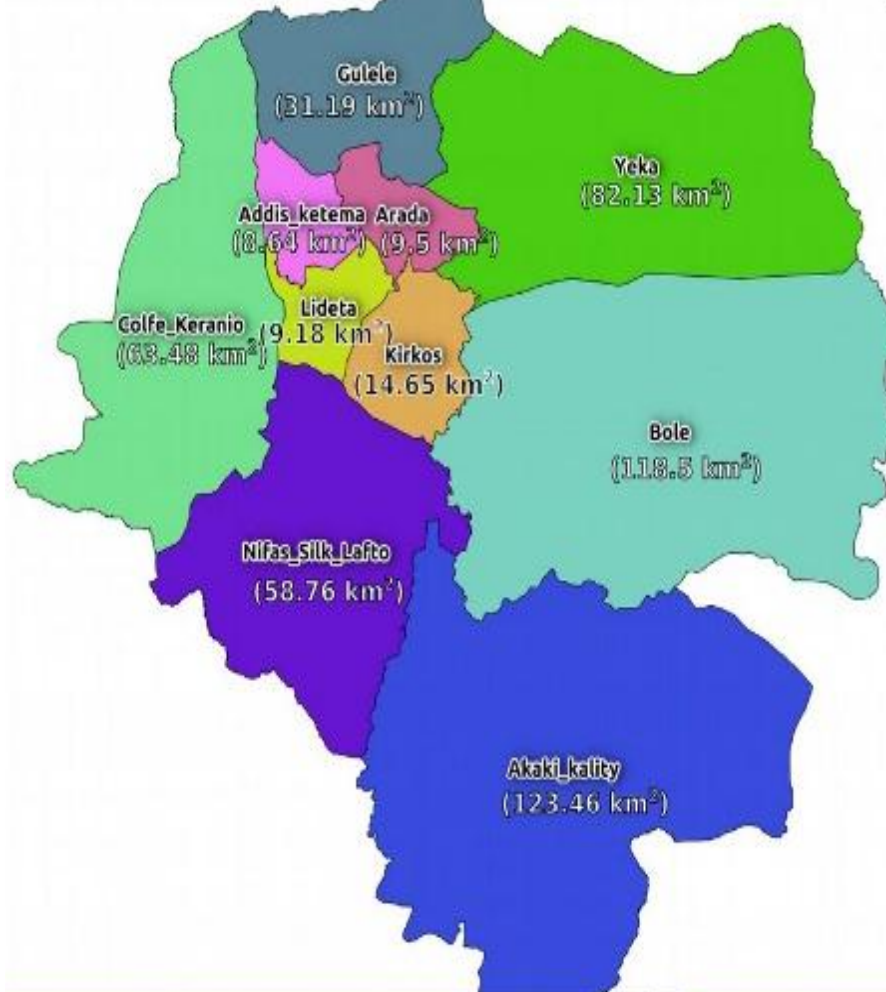
Appendix

Map of Addis Ababa Sub Cities with reference to locations



Source: [www. Aaca.com](http://www.Aaca.com)

Addis Ababa Sub cities by Population



Legend

Population by Sub city

Addis Ketema	(268,099)
Akaki Kality	(181,202)
Arada	(212,009)
Bole	(308,714)
Colfe Keranio	(415,647)
Gulele	(267,381)
Kirkos	(220,991)
Lideta	(201,613)
Nifas Silk Lafto	(316,108)
Yeka	(346,484)

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Source: www.Aaca.com