



Fig. 1. A framework of two forms of health care communication.

of the project is to promote and demonstrate digital storytelling as a tool for HIV outreach. “These compelling and emotionally engaging stories will serve as an important tool in helping to counter the misconceptions, stigma and discrimination that continue to create significant barriers to HIV testing and treatment for all populations.”

“We hope the personal narratives in Positive Spin will inspire more people who are living with HIV to get tested and treated, so that they can protect their health and the health of their partners,” added Miguel Gomez, AIDS gov. director (U.S. Department of Health and Human Services, 2015).

Meanwhile, Atkin and Silk (2009) show that studies such as the Three Community Study, a Stanford University program was successful; it proved that a media campaign with public service announcements, direct mail, etc. could produce measureable risk reduction in free-living population (without face-to-face instruction). The results were especially crucial in improving smoking and dietary habits directly linked to lowering cholesterol and blood pressure.

These results led to other studies such as the Stanford Heart Disease Prevention Program as well as the twenty-year Five City Project in 1978 in which Modesto, San Luis Obispo and Santa Maria were education communities, while Monterey and Salinas were designated as education communities. This educational campaign, not just targeting a sample but the entire population of the community, was significant in that, “It generated a pool of expertise at Stanford in the field of health promotion and community development, which pointed the way to the next stage of development” (The Stanford Preventions Research Center Homepage).

As depicted in Table 1, in 2013 in Japan there was an outbreak of rubella, in which 5,442 cases were reported as of May 1, 2013 (twice the number reported in 2012 and 87 cases in 2010). 90 per cent of the reported cases consisted of adults (over 20 years old) with 3.5 times more cases of male adults compared to female. There were many cases especially among male adults, in their twenties to forties and female adults in their twenties because these age groups were not vaccinated. The outbreak was the result of the Japanese law regulating the vaccination schedule system; that is, from August 1977 to March 1995 only middle school girls were vaccinated. However, in 1994 the law was amended to include boys. Furthermore, with various

changes to the law, although the vaccination rate for toddlers were high, the rate for middle school children greatly decreased. One factor contributing to the decrease was thought to be lack of information dissemination to the target audience. Hence, there are now posters available for every season to promote future parents to get vaccinated against rubella.

Contracting the disease was especially detrimental for pregnant women since the virus causes congenital rubella syndrome (CRS). Many babies were affected (heart, eye, ear complications, diabetes, etc.) because the parents’ age group had not received the vaccination as children. This resulted in the contraction of the disease later as an adult. In the seven months period from October, 2012 to April, 2013, 10 cases of CRS were reported in Japan (National Institute of Infectious Diseases Homepage).

5. An Integrated Framework of the Two Forms

Health care communication is a specialized field not very known to the general public; however, communication is a very important factor and can be correlated to risk management and social marketing. In this paper, we examined how the role of communication in health care is to efficiently provide high quality care. Therefore, defining and then utilizing specific forms of communication will lower health care costs by increasing productivity and efficiency; this integrated framework is shown as Fig. 1.

Firstly, we took up the form of communication in the context of risk management. The health care provider was the focus. Specifically we analyzed the checklist used by surgeons to prevent malpractice incidences. Factors affecting communication in health care should not be underestimated but should be utilized to serve society. That is, the overall well being of society depends on the effective collaboration of health care providers who are specialists and general administrative people who oversee patients and/or projects, etc.

Preventing health malpractice incidences in hospitals—fewer complications after surgery or general treatments—will lower the mortality rate, which leads to lower costs of health care. Therefore, using checklists to save lives or prevent complications is a malpractice solution. The problem is the medical culture is very difficult to change. Surgeons, like other highly skilled specialists, do not like to be checked or questioned (left side of Fig. 1).

Secondly from the potential-patient aspect of health care (preventive medicine) in which the target audience is the general public, we examined the form of communication in the context of social marketing, first dubbed by Kotler. Through promotional strategies, such as nation-wide or global campaigns, the general public will be equipped with more knowledge of diseases; people would know what to expect and what would be the consequences. Hence, people can protect themselves from pandemics through immunizations, or other preventive measures, etc. (right side of Fig. 1).

For example, by properly educating how good dietary habits affect overall health in the long run, people will become healthier. Using flyers or naming diseases over the media would be effective in getting out warning messages