

Strengthening Community-Based Communication Channels: A Sustainable Health Messaging Approach

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ABSTRACT

Objective: Health communication efforts often focus on message content while neglecting channel and source factors crucial for community engagement and sustainable health promotion.

Design: Evaluate a community-based communication strategy developed for place-based cancer prevention initiative in a historic neighborhood.

Setting: Acres Homes, a historically Black neighborhood in Houston, Texas.

Participants: Community leaders and residents of Acres Homes working in partnership with academic researchers and health communication specialists.

Intervention: The Acres Homes Cancer Prevention Collaboration is a research initiative which seeks to test strategies for improving health behavior in the context of place-based interventions and foster stronger collaborations between communities and researchers. The initiative implements a comprehensive communication strategy.

Method: Evaluate the communication strategy of the Acres Homes Cancer Prevention Collaboration using website analytics, community engagement metrics, material distribution records, focus groups, and Community Advisory Board feedback.

Results: Analysis showed 50% increase in unique website visitors, 60% increase in page views, reduced bounce rate (67%–53%), and increased time on site (3:59–7:32 minutes). Community advisors distributed 21 212 materials and recorded more than 21 000 resident contacts across 228 community events. Thematic analysis of focus groups showed residents value source credibility, channel integration, cultural relevance, and transparency in health communication.

Conclusion: This study demonstrates that strategic investment in community-based communication channels yields measurable improvements in message exposure and engagement.

KEY WORDS: cancer prevention, communication channels, community engagement, community-based participatory research, health communication, message exposure

Introduction

Health communication serves multiple functions: raising awareness, increasing knowledge, changing

attitudes, modifying health behaviors, and mobilizing community actions to improve health outcomes.¹ Well-planned health communication positions

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community organizations and coalitions to operate effectively, collaborate with stakeholders, and work toward common health goals. However, significant opportunities remain to better understand how health communication works in community contexts,² its value in public health practice, and best practices for place-based settings.³ Traditional health communication research has predominantly focused on message content choices and individual behavior change, often neglecting factors related to channels, message exposure, and community-level impacts.^{4,5}

Neighborhoods that include census tracts designated as persistent poverty offer an opportunity to implement and evaluate place-based, hyperlocal campaigns which embrace messengers and channels atypical of campaigns operating at state and national levels. Residents in these neighborhoods face elevated health risks due to geographic and structural disadvantages.^{6–8} Compounding health promotion challenges include medical mistrust, skepticism toward mass-mediated information sources, and gaps within social networks that leave some individuals isolated from health information.^{9–12}

This article demonstrates how a cancer prevention initiative in a persistent poverty area addressed these challenges. The initiative focused on building local communication capacity, integrating digital and interpersonal channels, and implementing place-based strategies that strengthen community networks to enhance sustainable health promotion. The work contributes to health communication literature by offering a process other initiatives can follow to implement a comprehensive communication plan and build sustainable health promotion capacity.

Communication infrastructure, channel factors, and community health promotion

Communication Infrastructure Theory provides a valuable framework for understanding community-based health communication.¹³ This theory emphasizes how community networks, comprising interpersonal connections, local media, and community organizations, facilitate information flow and collective action. In health promotion contexts, strengthening these communication infrastructures can enhance message reach, credibility, and sustainability.^{14,15}

The theory's focus on locally embedded communication networks is particularly relevant for persistent poverty areas,¹⁶ where residents may distrust mass-mediated health information and rely heavily on interpersonal networks for health-related decision-making.^{10–12} Unlike traditional health communication approaches that treat source factors as simple message variations, community-based communication requires

understanding sources as embedded within established local relationships and proven through demonstrated commitment to community welfare.¹⁰ This relational dimension is foundational in communities where historical experiences with medical exploitation have created legitimate skepticism about external health authorities.

Community engagement requires moving beyond traditional campaign models that prioritize short-term message exposure toward approaches that build lasting communication capacity. This shift involves supporting community organizations in developing their own communication infrastructure, enhancing local leadership capabilities, and creating sustainable systems for ongoing health promotion.¹⁷

Community-based health communication differs from campaigns produced for large media markets in several important ways. First, it emphasizes place-based tailoring that considers local histories, narratives, and geographic contexts.¹⁸ Second, it prioritizes building local capacity for ongoing communication efforts. Third, it recognizes community organizations and leaders as primary sources and channels rather than simply target audiences.

Method

Study design and setting

This study examined and evaluated the communication strategies and outcomes of the Acres Homes Cancer Prevention Collaboration (Acres Homes CPC). The Acres Homes CPC is 1 of 5 centers created through the National Cancer Institute's Persistent Poverty Initiative, the first major research program to address structural and institutional factors of persistent poverty in cancer contexts. The collaboration involves The University of Texas MD Anderson Cancer Center as the lead institution, partnering with The University of Texas at Austin Center for Health Communication and multiple community-based organizations.

The Acres Homes CPC is implemented in the context of MD Anderson's place-based cancer prevention approach, Be Well™ Acres Homes, in collaboration with more than 30 community organizations united together with residents of Acres Homes. The collaboration seeks to test interventions addressing risk factors for obesity-related cancer in the context of Be Well Acres Homes. The initiative also sought to collaborate with residents and community organizations to foster an environment that supports participation in research and health programs. Acres Homes is a historically Black neighborhood in Houston, Texas, with a population of approximately 56 000 residents. The

community faces significant health disparities as a persistent poverty area, including higher rates of cancer incidence and mortality compared with the broader Houston metropolitan area and the United States overall.¹⁹ The neighborhood has limited health care infrastructure but possesses strong community organizations and a robust social network.

Community asset assessment

In 2019, a systematic assessment of existing communication infrastructure and organizational capacity within Acres Homes was conducted. This process involved identifying trusted community organizations with established relationships and demonstrated commitment to resident welfare, all of which served to build community trust. The initial assessment was used to select Acres Homes as an intervention suite and build the initial steering committee for Be Well Acres Homes. In 2023, the Acres Homes Cancer Prevention Collaboration was created. They had an opportunity to fund a group to encourage community engagement with the research effort through a competitive process. The Acres Homes Community Advocacy Group was selected based on their existing mission alignment, community credibility, and organizational readiness. This asset-mapping approach recognized that community communication must build upon existing networks rather than creating parallel structures that compete for resources or attention.

The communication strategy work described spans mid-2023 through April 2025. Community infrastructure development, including brand coherence work, website enhancement, and Community Advisor recruitment, began when Acres Homes CPC funding was established in mid-2023. Focus groups to assess resident communication preferences were conducted in June and August 2024. Website analytics were evaluated by comparing the March–April 2025 period to the same 2-month window in 2024, providing a year-over-year comparison of digital engagement following the communication work. Community Advisor engagement data were aggregated across the full program period.

Community focus groups

Six focus groups were conducted and analyzed over 7 months with 60 residents to gather community perspectives on cancer prevention, research participation, and communication preferences. Some focus groups were set up independently, and some took place as part of a neighborhood meeting. All participants gave informed consent before beginning focus

group discussions. The study was declared exempt by the institutional Internal Review Board. The moderator guide was developed by a communication researcher at the direction of priorities set by the Acres Homes Community Advocacy group. The advocacy group and funder were aligned in seeking to learn more about trusted information sources in the community and how residents become engaged with programs. Questions related to healthy eating and active living were included as well. The moderator guide was based on reasoned action approaches, including the theory of planned behavior and the health belief model. Recruitment and data collection for the focus group project were led by the Acres Homes Community Advocacy Group and promoted on their social media channels. Focus groups took place in June and August of 2024. The advocacy group provided their own notes of the focus groups to the researcher analyzing transcripts. Full transcripts were thematically analyzed by a communication researcher using constant comparative methods based on a priori theory.²⁰

Thematic analysis of focus group discussions revealed several important insights about communication preferences and channel effectiveness relevant to community-level health communication outcomes in persistent poverty areas.

Source credibility (theme 1) emerged as a fundamental determinant of message acceptance, with community members consistently emphasizing the importance of receiving health information from trusted local sources. Participants specifically identified community leaders with established relationships and demonstrated long-term commitment to the neighborhood as the most credible messengers for health promotion content. This finding aligns with established communication theory regarding source characteristics and persuasion, while highlighting the particular importance of local legitimacy in communities where residents have experienced exploitation or neglect by healthcare institutions.^{21,22}

Channel integration (theme 2) represented a nuanced communication preference in that participants consistently valued communication approaches that combined digital accessibility with interpersonal interaction, allowing for both convenient information access and meaningful opportunities for questions and dialogue. This finding suggests that community health communication requires hybrid strategies rather than choosing between digital and face-to-face approaches.

Cultural relevance (theme 3) proved essential for message impact, requiring careful attention to multiple contextual factors including language preferences, communication styles, and integration with existing community events and traditions. Focus group

participants emphasized that health messages must be delivered in ways that respect and incorporate local culture. This finding reinforces the importance of using residents as cocreators of communication strategies.

Transparency and reciprocity (theme 4) emerged as critical trust-building elements, with community members appreciating clear communication about research purposes, methods, and findings, particularly regarding how community participation would generate tangible benefits for local residents. Participants valued knowing not only what researchers hoped to learn, but how that knowledge would be translated into resources and improvements for Acres Homes residents.

Media and community engagement strategy

In response to insights gathered from focus groups, key stakeholders set about creating a communication plan which focused on making sure messages for programming and research studies were always delivered through a trusted community source, which required strategic investments in word-of-mouth efforts, and in improving locally-owned digital channels for message distribution.

The health communication work, starting in mid-2023, focuses on 3 primary strategies: (1) developing new digital and interpersonal communication infrastructure, (2) strengthening existing community communication channels, and (3) building local organizational capacity for ongoing health communication efforts. Evidence presented includes mid-2023 through April 2025.

Community Advisory structure

Community Advisors were recruited from within Acres Homes through an open application process; applicants were required to live, work, or worship in the neighborhood, and Spanish-speaking applicants were actively encouraged to apply. This selection approach ensured that advisors brought pre-existing community relationships and local credibility to their outreach roles. Advisors committed to 10 hours of community engagement activities per month and received a \$500 monthly stipend over a 1-year term. Responsibilities included attending regular project meetings, reviewing program progress for community fit, sharing health information and research opportunities with residents, and attending local events. Advisors were equipped with standardized talking points, sample social media posts, and branded print materials to support consistent and accurate message delivery. Community Advisors maintained logs of their engagement activities, including events attended,

materials distributed, and estimated resident contacts, which were aggregated monthly. Self-reported logs are a recognized limitation of community health worker program tracking and are noted as such in the Limitations section.

Organizational partnership

Through a competitive process, the Acres Homes CPC funded the Acres Homes Community Advocacy Group (AHCAG) to serve as the primary community information channel, providing resources for brand development, website enhancement, and communication capacity building.

The University of Texas at Austin Center for Health Communication provided ongoing support for visual design, website development, content creation, and strategic communication planning. The health communication group collaborated with the community advocacy group to strengthen their brand and improve their website. Specifically, the community advocacy group had the beginnings of a brand identity, which the health communication group then completed by making a full suite of promotional materials, visually enhancing their website, and providing essential brand collateral. In addition to visual enhancements to the website, the health communication group sought to resolve technical difficulties. The site was reperfomed to focus on making the website easier to update and change, as the advocacy group requested.

Brand development emerged as a particular focus, encompassing both visual identity and organizational voice. The health communication team standardized AHCAG's use of logos, colors, and typography across print and digital materials, while also working collaboratively with community leadership to articulate key messages and a refined mission statement that captured the group's established community reputation and made it actionable across channels. This comprehensive branding effort included the creation of promotional items such as outdoor rally fans and neighborhood-shaped stickers, with all design elements selected through community input to ensure relevance and local appeal.

Message refinement involved the collaborative creation of clear, community-tested key messages that strategically positioned as the advocacy group "the central resource and information hub of Acres Homes." This messaging work culminated in the articulation of a refined mission statement: "For us, it is all about making sure the people in Acres Homes are healthy and heard." These messages underwent community testing to ensure they resonated with residents' experiences and expectations while clearly

communicating the advocacy group's role within the broader network of organizations serving the neighborhood.

Channel diversification significantly expanded communication reach through strategic development of multiple platforms including Facebook groups, email newsletters, website resources, and coordinated media outreach capabilities. This multichannel approach was supported by the provision of professional media kits and press contact lists, enabling the advocacy group to engage with local media outlets and amplify community voices beyond what previously was possible. The sustained community engagement approach also aligns with research showing that repeated exposure to health messages over time can strengthen message responses and behavior change intentions.²³

Technical infrastructure progress included implementation of a user-friendly content management system that allowed community members to maintain and update digital platforms without requiring specialized technical expertise. This technical capacity building ensures that enhanced communication capabilities remain sustainable and community-controlled, avoiding the common problem of digital platforms that become obsolete when external technical support ends. The infrastructure investments support rapid updates to the information available in the neighborhood across health and policy domains, and in response to local crises (Figure 1).

Communication metrics

Data collection used multiple sources to capture both quantitative outcomes and qualitative insights about the communication process and impacts focused on evaluating digital and interpersonal channels, organizational communication capacity, and community-level communication outcomes. Website analytics data were collected for the AHCAG website from March 1 through April 30, 2025, and compared to the same period in the previous year. Metrics included unique visitors, page views, bounce rate, average session duration, and user engagement patterns.

Community Advisors maintained logs of their community engagement activities, including events attended, materials distributed, and estimated resident contacts. These data were aggregated monthly and analyzed for patterns and trends. Meeting minutes from 16 Community Advisory Board meetings, project reports, and communication materials were analyzed to understand intervention implementation and stakeholder feedback. All printed and digital materials were tracked for distribution volume, channels used, and geographic reach within the community.

Results

The Acres Homes CPC achieved substantial community engagement through its multipronged communication approach. Community Advisors attended 228 community events over the program period, collectively recording more than 21 000 resident contacts through discussions about cancer prevention and research opportunities across diverse community settings. These figures represent total contacts over the program period; individual residents may have been reached on multiple occasions.

The strategic placement and repeated distribution of materials across high-traffic community locations²⁴ ensured multiple exposure opportunities for community members. The Acres Homes CPC's communication efforts culminated in a large community cultural festival and resource exposition that attracted approximately 450 community members. This event served as both an outcome measure and a vehicle for demonstrating the enhanced communication capacity of community partners by offering low-stakes ways for people to foster relationships.

Message content and communication materials

The first step in the communication planning process was refining AHCAG's core organizational messages collaboratively with community leadership, establishing the group's identity, mission, and role as the primary information hub for Acres Homes residents (see Supplemental Digital Content, Table S1, available at <http://links.lww.com/JPHMP/B724>). To support interpersonal outreach, the UT Austin health communication team developed a full suite of branded print and digital materials, including handouts, display banners, culturally selected promotional items, social media templates, and a professional media kit (see Supplemental Digital Content, Figures S1–S2 and Table S3, available at <http://links.lww.com/JPHMP/B724>). An interactive community resource map was built and integrated into the AHCAG website (www.acreshomescag.org/local-resources), enabling residents to independently locate health, wellness, and social services within the neighborhood.

Platform enhancements

Website analytics demonstrated significant improvements in digital engagement following the communication work, showing the impact of practical work on digital channels and building organizational communication capacity.

Comparing the March–April 2025 period to the same timeframe in 2024, the advocacy group website

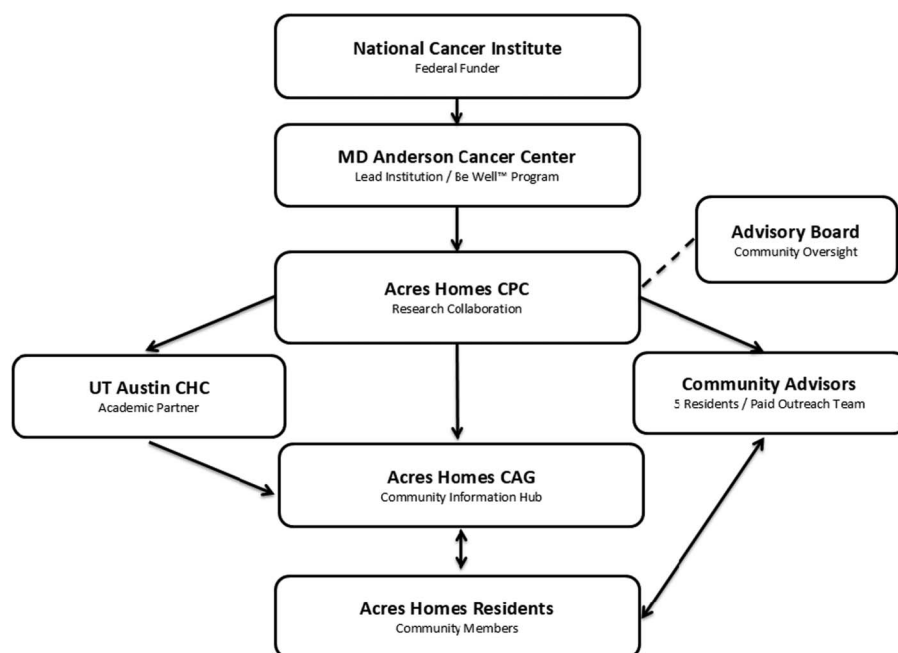


FIGURE 1 Functional model of community-based communication infrastructure for the Acres Homes Cancer Prevention Collaboration. Entities are labeled by organizational type and functional role to support transferability to other place-based health initiatives. Solid arrows indicate funding, contractual, or employment relationships; dashed arrow indicates advisory relationship; bidirectional arrows indicate ongoing community engagement. CAG, Community Advocacy Group; CHC, Center for Health Communication; CPC, Cancer Prevention Collaboration.

showed marked improvements across all key metrics. Unique visitors increased by 53%, page views increased by 60%, bounce rate decreased from 67% to 53%, and average session duration increased from 3:59 to 7:32 minutes. These figures represent population-level website activity for the defined comparison periods and are reported descriptively rather than as inferential statistics.

Sustainability and long-term capacity

Communication infrastructure enhancements offer community ownership and long-term sustainability through specific capacity-building investments. The Acres Homes Community Advocacy Group maintains independent control of the enhanced website platform through the implemented user-friendly content management system, allowing community members to update and maintain digital platforms without external technical support. The brand development work, including the refined mission statement, provides the advocacy group with a sustainable communication identity that positions them as the resource hub as an ongoing community asset.

Community Advisors trained through this initiative continue their outreach work, having demonstrated their capacity through distribution of materials and leadership at community events. These enhanced

capabilities are integrated within the broader Be Well Acres Homes network of more than 30 community organizations, ensuring support and collaboration beyond individual research grant periods.

Discussion

This study demonstrates the practical application of Communication Infrastructure Theory in health promotion contexts, showing how strategic investments in local communication networks can yield measurable improvements in message exposure and community engagement. The results support the theory's emphasis on the importance of strengthening community networks comprising interpersonal connections, local media, and community organizations. The integration of digital and interpersonal communication channels proved particularly valuable, addressing limitations identified in previous research about the challenges of controlling information flow through interpersonal networks.¹⁰

Data from the Acres Homes CPC contribute to understanding of source credibility in community contexts, demonstrating how organizational brand development can enhance the influence of locally embedded sources that act as essential communication channels. Unlike mass-mediated health communication where sources are often represented through logos

or brief attributions, community-based communication allows for more complex source–audience relationships built through ongoing interaction and demonstrated commitment.

Practical implications

Several practical insights emerge from this initiative that advance understanding of how to implement community-based health communication strategies. These findings offer evidence-based guidance for practitioners seeking to move beyond traditional campaign models toward sustainable, community-owned infrastructure approaches.

Integrating digital and interpersonal communication channels. Digital platform enhancements must be designed to support and amplify face-to-face community connections, which positions interpersonal outreach to drive engagement with digital resources and vice versa. This synergistic approach can prove particularly valuable in communities where residents may have varying levels of digital literacy or access and skepticism of mass-mediated information.

Building sustainable organizational communication capacity

Investment in local organizational infrastructure emerged as a critical factor in planning for long-term sustainability, contrasting sharply with external campaign models that often leave communities without enhanced capacity after intervention periods end. This demonstrates that capacity building must address multiple organizational dimensions simultaneously: brand coherence to enhance credibility, technical infrastructure that community members can maintain independently, message development processes that involve community testing and refinement, and diversified communication channels that meet community members where they are. This comprehensive approach ensures that enhanced communication capabilities become embedded within existing community structures and match local enthusiasm rather than creating parallel systems that compete for resources or attention.

Successful implementation starts with careful evaluation of local communication infrastructure, existing organizational strengths, and community leadership networks before designing specific intervention strategies. This assessment should identify organizations with missions aligned with health promotion, established community credibility, and readiness for capacity expansion rather than attempting to create entirely new organizational structures.

Setting outcome goals for community health promotion

The study illustrates how community-based communication evaluation requires metrics that capture both individual engagement, collective impact, and opportunities for sustainability. Community infrastructure approaches require assessment of organizational capacity development, network strengthening through channel development, and sustainable system creation. The combination of digital analytics, community engagement tracking, and qualitative feedback provided complementary perspectives on the influence of communication strategies on message reach while enabling ongoing strategy refinement. Practitioners should develop measurement frameworks that capture both immediate engagement outcomes and longer-term capacity-building indicators, recognizing that community infrastructure development may require extended timelines to demonstrate full impact. Part of this must include data return, reporting, and continuous involvement with community members.

Limitations and future research directions

The work involved multiple components implemented simultaneously, making it difficult to isolate the specific contributions of individual strategies. Whether researchers should attempt to isolate the effects of individual strategies within multicomponent interventions is debated in the health communication and public health intervention research literature. Some leaders in the field have lamented “kitchen sink” interventions because although they may achieve desired results, it becomes impossible to determine where programs should be scaled up or scaled back in situations with varying levels of resources.^{1,25} Alternatively, others have advanced the perspective that social change, including health behavior change in individuals, can only come about through system activation.^{26,27} This perspective would argue that multicomponent strategies create a synergistic effect greater than the sum of the effects from individual strategies.

The evaluation focused primarily on process outcomes and short-term engagement metrics rather than longer-term health behavior or health outcome changes. Although increased message exposure and community engagement represent important intermediate outcomes, those measures alone cannot tell us how the audience responded. Future research should more directly assess perceptions of community information sources, including credibility and reliability. Impressions cannot be directly linked to other outcomes in this project. However, other behavioral

Implications for Policy & Practice

- Studies consistently show that encouraging conversations about health using trusted messengers is optimal for persuasion, particularly in communities experiencing barriers to information and those with lower trust in authorities and institutions.
- Public health communication and promotion research often focuses on content choices and effects, and more scholarship is needed on how to increase message exposure.
- The communication strategy of the Acres Homes CPC offers a replicable process for transforming community organizations into health communication hubs.
- Data from the project suggest that strategic investments in community-based communication infrastructure can yield significant improvements in message exposure, community engagement, and organizational capacity for health promotion beyond traditional campaign models.

metrics were encouraging. The increase in traffic to a website promoted by the Acres Homes CPC, and high attendance numbers at a sponsored event, both suggest that the Acres Homes CPC has credibility. Furthermore, future research should examine connections between enhanced communication infrastructure and health-related changes. In addition, more studies in communities of different demographic and psychographic profiles are needed.

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