

QUALITATIVE HEALTH COMMUNICATION
VOLUME 3, ISSUE 2, 2024
ISSN: 2597-1417

Editorial

Matilde Nisbeth Brøgger
Jane Ege Møller

While we are in the exciting process of receiving and reviewing contributions for our special issue on *Approaches to Qualitative Health Communication: Theories, Methodologies and Methods* (<https://tidsskrift.dk/qhc/announcement/view/1152>), we are planning the upcoming issues. In the future, we will have a thematic issue (published in January) and an open call issue (published in August) as this will enable QHC to reach the depth of specific topics while also allowing for the vast span of research areas that the health communication field encompasses. We welcome ideas for future special issues, so if you have an idea, please contact us (qhc-journal@au.dk). We can already announce the topic of the next special issue, which will be *Digital Health Communication* and edited by Maja Klausen, University of Southern Denmark & Maja Nordtug, University of Oslo, Norway. The call for papers will be published on the QHC website within the next month, so stay tuned. We invite authors interested in submitting their work for the open call issues to do so at any time.

Issue 3(2) contributions

This issue features five interesting qualitative health communication articles.

Purewal, Smith & Nicole investigate how Canadian civil society organizations obtained, shared, and communicated multilingual COVID-19 information with people whose first language is not English. Using virtual interviews with employees from civil society organizations, they demonstrate how such organizations amplified public health messages, addressed confusion concerning public health orders, and engaged with community members to better understand and address local needs. This research underscores the role of civil society organizations as community-based knowledge brokers. The authors offer several recommendations to improve equity-based preparedness, response, and recovery efforts in future health emergencies.

Tremblett examines how cervical screening is portrayed in UK information leaflets and the potential impact on public engagement with screening programs. Using discourse analysis, the article analyses the current UK information leaflet, and a version redesigned with a public and patient involvement group. While the current leaflet uses discourses of neutrality and patient autonomy, the redesigned leaflet presents a simplified, step-by-step guide to screening that aims to motivate and persuade readers. The author concludes that shifting the current discourse to simplified and clearer language which emphasizes choice in the process could help people make an informed decision to engage in screening.

LaFreniere & Hiland investigate how U.S. college students disclose their COVID-19-positive statuses, using communication privacy management theory as a framework. Based on interviews with 20 students, the study identifies key themes related to information control, co-ownership of information, boundary coordination, and situations where disclosure is forced or required. The findings reveal how the stigma surrounding COVID-19 and prevailing cultural norms influence students' privacy perceptions, information control, and disclosure behaviors. These insights have implications for developing institutional, educational, and public health strategies for future pandemics, highlighting an under-explored connection between privacy management, stigmatization, and cultural norms.

Prasad & Forsyth explore the information resources utilized by cosmetic medical tourists in their decision-making process. Through interviews, the study reveals that Australian cosmetic medical tourists rely on four key resources: websites, personal social networks, online support communities, and consultations with surgeons. These resources provide both experiential and procedural information, which can be either generalized (accessible to everyone) or personalized (based on individual experiences or tailored advice), and are found both online and offline. The study underscores the importance of digital health literacy for the successful navigation of the cosmetic medical tourist journey.

Garcia examines the influence of routine interactional procedures on the success of crisis negotiation strategies during an emergency services call involving a suicide threat. Through

conversation analysis of a publicly available call, the study identifies the use of techniques such as enhancing the caller's sense of autonomy, demonstrating active listening, and employing distraction to prolong the conversation. It finds that interrupting or overlapping the caller's speech or substituting demands for requests tend to be less effective. The article suggests that training call takers in fundamental interactional procedures may be as crucial as teaching standard crisis negotiation techniques for managing suicide announcement calls.

Enjoy Issue 3(2), and please submit your work for our future issues!



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