

Creative Brief

Public Health Connected | Organization Identity Development

Prepared by Picture Impact on behalf of Public Health Connected
November 18, 2020

The purpose of the creative brief is to document a shared understanding of the project's purpose, scope, timeline and creative direction. The creative brief clearly outlines the work to be done, the design constraints (print, digital, dimensions, media), the creative direction (audience, tone, style), the roles of the client and designer, and how the approval process will work.

The creative brief needs to be signed by both parties (designer and client) before the designer begins and is the document to reference when determining if the designer has met the objectives of the assignment.

Objective

The objective of this project is to create a brand identity for Public Health Connected, a new organization.

Credibility is of utmost importance when building a new organization in the context of many other organizations, projects, and issues all clamoring for attention. You not only need to cut through the noise and stand out, but once people find you they must then feel you are exactly the solution they are looking for. This means knowing your audience and what they find credible.

While the words, ideas and expertise of the founding team all lend credibility to the organization, they are not sufficient. The visual expression of the new organization is more important than you may think. Research suggests that if the audience does not find the visual presentation to be of high quality they will write off the information; poor quality visuals lead to questioning the credibility of the ideas themselves.¹

What makes a brand *credible* is that the audience can see themselves in it. The style is aligned with the style of other organizations, projects and companies they already trust. It uses similar visual elements such as color, typography and imagery. The language and the ideas are relevant and easily understood to the target audience.

What makes a brand *compelling* is that in addition to having that credibility, it also evokes a desired emotion: joy, comfort, connection, ease, love, happiness, awe, surprise, delight.

The overall objective of the PHC brand is to create a sense of ease in the overwhelm of public health communication. The brand, especially as expressed on the website and other materials and media, must make PHC look like a legitimate organization that will make a positive and lasting impact in public health.

This project is to begin to develop a professional brand that other public health practitioners (peers) refer to, that attracts funders, and is a platform off of which campaigns, tools, resources, and new thinking can be launched.

The SAFER framework is the first project of PHC. For each campaign that PHC launches, including the SAFER campaign and framework, the purpose of that campaign needs to be considered, separately from the overall mission of PHC. The SAFER framework is for public health educators, those making public health decisions at the personal and community level, and must ultimately be presented in a way that a wide variety of people can put it to use. This is beyond the scope of this assignment but we bring it forth here as an example of what is at stake in the branding.

¹ Berinato, Scott. *Good Charts : The HBR Guide to Making Smarter, More Persuasive Data Visualizations*. Brighton: Harvard Business Review (HBR) Press, 2016.

Project Background

Founding Public Health Connected

Vulnerable populations, amidst the United States Covid response, desperately need a strong public health campaign that is relevant to them and empowers them to make informed decisions to successfully reduce their Covid-19 risk. Without this type of campaign, people will continue to contract Covid-19, get sick, unknowingly infect others, suffer long-term consequences, and potentially die.

Before the pandemic, Dr. McClamroch and her colleague Dr. JoLynn Montgomery were writing a book to teach critical thinking skills to high school students in order to help them make informed decisions about their health. Once the pandemic started, they quickly realized that people of all ages were struggling to make informed decisions about ways to reduce their Covid-19 risk. Together, they created a decision-making [framework](#) that walks people through the process of identifying and layering risk reduction strategies that they can use successfully.

At the same time, Dr. McClamroch started a Facebook group called “Public Health Rock Stars” at the beginning of the Covid-19 pandemic as a way to connect to other epidemiology and public health experts and discuss emerging Covid-19 information. The group currently has over 3,000 members who want to improve the Covid-19 response in the United States and worldwide.

From this Facebook group a team of public health experts has formed around the accessibility and impact of current Covid-19 messaging. They are working to adapt the McClamroch-Montgomery framework to create S.A.F.E.R. (Supportive and Accessible Framework for Effective Risk-reduction). The team is dedicated to creating alternative messages based on the S.A.F.E.R. framework to reach the communities hardest hit by Covid-19. To work toward this goal, Dr. McClamroch and her team created Public Health Connected (PHC), a new public health organization (501(c)(3) status pending).

Mission & Vision

To provide simple, clear and trusted public health information to a broad, often marginalized, audience—specifically, the decision-making tools they need to make informed decisions about their health and the health of their communities.

PHC envisions a world where everyone is able to make informed decisions about their health.

Planned action

PHC is launching with one primary project, the S.A.F.E.R. framework and S.A.F.E.R. app. The purpose of this framework and app is to recognize that no one is living in the ideal circumstances to completely eliminate risk of spreading Covid-19. Our lives are complex and we have many conflicting demands and priorities. S.A.F.E.R.

is unique because it helps people make decisions about managing risk in their own lives in ways that set them up for success.

PHC is aiming to offer a free mobile app, a workbook version, and a training guide to help people protect themselves, their families, and their communities during the Covid-19 pandemic. The app will lead people to actual recommendations, not just a risk categorization. PHC's offerings aim to go beyond universal availability to intentional access by specific vulnerable and underserved communities. An initial MVP (minimum viable product) of the app is underway and the team is actively working to build a social media presence.

PHC intends to partner with community-based and community-coalition orgs that already have trust and buy-in to efficiently disseminate, evaluate, and iterate products. In the long run, PHC would like to combine community organizing and public health expertise to empower communities to tackle issues like air quality, gun and youth violence, and toxic masculinity.

What is needed (bigger picture)

While Public Health Connected is growing out of the Covid-19 pandemic, it is positioning itself more generally within public health and seeks to build the infrastructure and credibility to remain relevant and useful for a wide variety of ongoing and emerging public health challenges. Covid-19-specific messaging and projects will, over time, be able to stand on their own with distinct branding and strategic targeting to intended audiences. As these additional brands, dedicated to specific audiences and issues, are used to accomplish accessibility and impact, some may realize their interaction with a particular campaign or project is related to PHC as a larger organization and others may not.

PHC will have a consistent brand throughout, one that helps to build the home organization and central mission. The aesthetic for PHC—as the host to multiple projects and campaigns—needs to communicate reliability, relevance, compassion and credibility. It forms the backbone for attracting resources, reassuring people with positional power, while not stealing the show from the work of PHC—which will inevitably have multiple visual identities necessitated by their mission of reaching marginalized communities.

Competitors & Public Health Messaging space

Dear Pandemic (+)

Dear Pandemic: <https://dearpandemic.org/>

Notable for their role in curating reliable content, projecting themselves as a trusted source, making information more easily accessible and less overwhelming. Their look is clean and simple, while having touches of personality and welcome. The quirky color choice, a fun and simple logo and wordmark and calling out their “nerdiness” all give the initiative an easy to befriend personality. Additionally, they have a compelling and trustworthy forward-facing team that projects both professionalism, friendliness, and mirrors the demographics they hope to reach. Very connectable and person/user-centered site and visual design.

Social that supports (+)

#Socialthatsupports: <https://socialthatsupports.com/>

A great example of leveraging social media with a back-up website to allow for greater flexibility of use of their content. In the future the home PHC website will have links to various projects and likely host their flagship S.A.F.E.R. materials and framework (made visual) in addition to its own site. This site is content forward, which PHC is not yet ready for, however it is modern, fun and lively, and audiences can see themselves reflected in images throughout the site. The site is pretty limited with just the basic information presented beautifully.

The Public Good Projects (+)

Organization site (donor/funder/peer audience): <https://publicgoodprojects.org/>

Project site example (young people with mental health issues): <https://likeoneanother.com/>

Project site example (mental health): <https://mentalhealthchamps.org/>

Project site example (sex positive, reproductive health): <https://laylasgotyou.com/>

A fantastic example of an organization site with microsites within. The head site is very, very simple—almost sparse, but its color palette and use of light iconography make it less corporate and more relatable to its mission and projects. It would be a stronger site with human imagery to help visitors connect more strongly to mission, it's perhaps slightly more sterile than PHC would like to project.

Your Local Epidemiologist (-)

Your local epidemiologist: <https://yourlocalepidemiologist.com/>

A similar origin story to PHC and leveraging of epidemiological expertise as a response to Covid-19, aiming to translate science to the public. This website communicates shoe-string budget, not a wide coalition (just one person), and no organizational support. The site's menu is layered and chaotic, there is no top banner, the brand is not used consistently or throughout in various iterations, there is no color palette applied, content does not make use of the space on the screen but is a single column, and there are no images to humanize the mission or content. It does not inspire confidence. It speaks of scarcity and overwhelm; that someone who cares a lot is unsupported. I'm not sure I want to join what others have not joined.

Public Health Communications Collaborative (-)

Public Health Communications Collaborative: <https://publichealthcollaborative.org/>

Another organization trying to cut through the communication noise to make public health easier to communicate, however their primary audience is their own—public health officials. As such, this site projects bureaucracy and healthcare industry in its color palette, reliance on words with very few images, and content presented in a largely uncurated fashion but relying on users to select what they want and to understand insider lingo (for example, the difference between “daily download” and “recent updates”). Important “misinformation” information is hidden. This site is not friendly to its user and is too strictly healthcare, relying

too heavily on a government-type persona for communicating credibility. In contrast, PHC will need to create credibility by aligning a site to its mission of reaching marginalized communities through reflecting those communities and demonstrating visually and through well-edited simple language that it has the capacity to deliver on its mission.

Creative Direction

The following, in the context of project background, is intended to help jumpstart the logo development process and provide guidance to a skilled graphic designer who has expertise in brand creation and is able to work within guidelines while bringing their distinct artistry to the table. The designer is expected to use professional design applications and deliver both editable files for future design use, and exported logo files for immediate use in digital and print applications.

Audience

Primary audience

The primary audience for the organization branding are those who will support the organization in its early growth, providing financial resources, contributing expertise, and making connections. This includes funders (foundations, corporations, individuals), potential organizational and community partners, and professional peers (other public health professionals, epidemiologists), and the on-line followers looking to take action through giving to help their communities.

While these groups of people have differences, what they share is a high level of education; understand the value of accurate, science-based health communication; can understand that different groups of people (communities) have specific needs, barriers, and motivations for healthy behavior—and that what works is making information and tools relevant to their specific context; and value health and wellbeing for all. The premise of PHC will be easy to grasp and they will be able to readily see its value. They feel appreciative of experts helping them navigate what they perceive as a data overload and want to make that available to more people.

This is a group who will be using their resources, positional power, connections and expertise to further the mission of PHC. For this group credibility and professionalism are as important as being able to see the positive impact their contribution will make.

Ultimately, this group will want to see that their investment will have a positive impact, and will lead to building an organization that can grow into its big mission. The brand identity needs to demonstrate PHC's capacity to deliver on its mission.

The organization's brand needs to be crisp and clear, with a spark of interest either through the color of the mark or through its shape. It should offer something in the realm of other public health organizations, but

with a fresh, friendly twist. This brand will be the umbrella for all PHC future projects, which will each have their own campaign branding to reach specific audiences.

Secondary audience

PHC exists to provide communities that are not using the high quality health information that exists, because of language, literacy, relevance or overwhelm. Specifically, PHC seeks to target vulnerable populations—such as communities who do not speak English as their heart language such as migrant farm workers, refugees, immigrants and their families; those who do not have economic resources or easy access to health care in their communities, such as rural Americans or underserved urban communities. These are people who are making tough decisions, often with incomplete or conflicting information and resource constraints.

This audience is not educated in health or epidemiology. Some members of the family may have secondary (high school) education, or even higher, but do not have the ability to translate complex epidemiological information for their loved ones, or balance science/epidemiology, context/lifestyle, relational/social needs in making decisions for their own health, or for their family's well being. Over time this secondary audience will be segmented for targeted branding, visuals, and engagement on various public health issues as circumstances indicate.

While S.A.F.E.R. will ultimately have a skin that reflects this primary user (this secondary audience), for now the primary PHC brand should not be off-putting to this key user. The brand should balance the need for credibility for the primary audience (funders, partners, peers) while not being so clinical or corporate that it loses credibility (trust) with this audience. Though it may not be created specifically for them, the brand should not be so corporate that it is not welcoming. They should see themselves within how the brand communicates PHC's mission.

Graphic style

Clean, professional, simple. Readability is important. Not overly medical. Friendly and inclusive.

See the provided mood board for examples.

Imagery: health vs medicine

Health is a broad concept that often includes more than just physical health, encompassing community, family, social and emotional health. The focus is on wellness and prevention more so than diagnosis and treatment. Imagery is of hearts, relationship, connected circles, rings.

Medicine, the “medical model,” is treatment focused. The imagery tends to be more medicine-centric. Rx, the emergency cross, a stethoscope, etc. These more clearly institutional, medical symbols might be intimidating to some.

Common themes in this space

We looked at logos using search terms:

- + Public Health
- + Health Connected
- + Health Communications
- + Public Health Communications
- + Community Health

The visual results of this search can be seen in the provided mood board.

You will notice a remarkable similarity across brand marks:

- + Circles or rings with multiple colors, interleaving colors and shapes, multifaceted rings, and use of gradation. The ring, especially one that has multiple components or arcs, is a common symbol for “public” and “community.”
- + The infinity symbol or intersecting circles. It is unclear how this relates or is understood by a broad public in terms of health, but perhaps infinite living or as a symbol of longevity.

Use with caution:

- + The medical cross. This can be very sterile and intimidating, something associated with an emergency or crisis more than with care. It heavily connotes medicine, not necessarily health. It is the symbol for “hospital” and in many places the hospital is not the place for prevention or health, but the place you go for treatment, disease, and emergency care. The cross can still be effective. Making it more subtle by softening it with natural elements or using the negative space can make it more welcoming and encompass more than the clinic.
- + People, connected, hearts, hands, hugs. This direction can quickly become trite.
- + Leaves, trees, and butterflies are common in health and wellness focused logos. These images can easily be confusing or distracting from a health message.

Logo + wordmark

The logo and wordmark should be a flat illustration with both a horizontal and vertical option. Do not use bevelled, 3D or shading. It needs to be developed with color but easily converted and readable in one color (all black or all white), with high contrast for easy readability with color blindness. It is possible to use a color gradient, but do so purposefully.

Stay away from the use of logotype (“PHC”).

Colors

In general, color palette choice needs to be warm and inviting, and accessible to people with various types of colorblindness or sensory processing disorders. Using a high-contrast design that can easily be read in one

color (all black or all white) will achieve this goal. Given this, there are a number of directions you could go with the color palette. Each of these has a benefit, and drawbacks.

- + Many of the public health logos use a modified rainbow (often slightly muted or in jewel tones) in the mark. The expression of these colors beyond the mark is often quite limited, and the branding reverts to a default blue (for medicine) or white (no design treatment). As common as the approach may be, going this direction it would be difficult to have PHC stand out against the array of all the other organizations, brands and logos in this similar direction, particularly since the organization name is so common. What will you do to differentiate?
- + Often blues are chosen as the primary or anchor color. However, be careful with blue as it often connotes clinics, medicine and the medical approach (and corporations), which is different than a public health and wellbeing approach, and could be off putting in community-based and non-clinical settings. It could send the wrong message that what is being put forth is not attainable or is for someone else. It is often the color used by government, and can also be intimidating to those who are undocumented, or not of the dominant culture. Dark blue has a lot of weight and as such can seem to add credibility, but this is a false sense of “credibility,” one that echoes the systems and structures that are not serving the very people you’d ultimately like to reach. If you must use blue, go a bit brighter in hue to make it more vibrant, or mute the tones to make it more “comforting”. Use gradients, a bright and unusual pop (hot pink, mint green, bright yellow), and images of the impact community (with overlays) to help soften the stiffness and overpowering nature of this “traditional” health/medicine color choice while still maintaining the professionalism desired, particularly when using a limited color palette across the mark and the site.
- + Choose colors that will make the brand fresh and contemporary. A dark muted purple is a welcoming color but sets the brand apart from other public- and community-health focused sites where the palette tends to be in the blue/green/purple, or features orange/red combinations. Use purple sparingly in application, and choose a hue that is darker and a bit closer to blue to keep it relevant to the funder audience. Too much purple is overwhelming, and too bright of a purple, especially with a lot of other colors, can easily be seen as only applying to the LGBTQ community.
- + Choose just one color (1 color + black) for the mark and then build on it bringing other colors in through the expression of the brand (e.g., as color blocks or overlays in the website, or in social media branding)
- + Or, use a very limited palette in the mark steering clear of that rainbow approach (2-4 colors, perhaps with one that is a pop, and the others in closer harmony to each other). Consider more contemporary choices here. Look at social media feeds of the target audience and choose from there.
- + Choose warm neutrals to offset colors. Stay away from grey.

Typography

The choices need to be a clean, clear sans serif for wordmark and headings (e.g., **Montserrat**, **Raleway**). Common, easy to read sans serif typeface for the body text (**Open Sans**, **Proxima Nova**, **Nunito**). Having multiple weights in the type may be useful (bold/black with light), similarly using 2-colors to separate wordmark from tagline—both optional. Adding a classic serif typeface for special content such as quotes, call to action, and subtitles can also be a nice addition, staying to classic typefaces can help keep this readable for

the widest audience. No handwriting, hand lettering, or display lettering which work against both professionalism and accessibility.

Scope of Work

1. Logo + wordmark; developed in color; horizontal and vertical options; recognizable in single color (white on a color field, black on white, etc.).
2. Color swatches (primarily for web development and social media application)
3. Basic typography (primarily for web development and social media application)

Out of Scope

1. Brand Strategy (taglines, full brand expression)
2. Brand Style Guide (full) (photography treatment, taglines, full set of logo use guidelines)
3. Full identity kit (letterhead, report and presentation templates)
4. Social media branding set (square images for twitter, instagram and facebook; banner for LinkedIn, Medium, and/or Facebook)
5. SAFER campaign and app branding or interface
6. SAFER framework visualization

Deliverables

1. Logo file for print and digital use (EPS, PNG, JPEG and PDF files)
2. Color swatches with RGB, CMYK and Hex information (spot/Pantone if applicable)
3. Typography including suggestions for print and web applications

Roles

Kristi McClamroch will provide final approval and decisions for design and project execution.

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Signature

I agree that the contents of this creative brief accurately convey the scope and creative direction for the Public Health Connected brand identity project.

By CLIENT (Public Health Connected)

By DESIGNER

Signature & date

Signature & date

Printed name & title

Printed name & title