Health Communication through Edutainment: A Case Study of the Short Film "Raw Pork, Deafness, Do You Know?" By Tai Baan x Department of Disease Control[1]

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Abstract

Background: Tai Baan Studio, a leading filmmaking company specializing in local Esan culture, collaborated with the Department of Disease Control to produce the short film "Raw Pork, Deafness, Do You Know?" This film aims to communicate health messages for the prevention of Streptococcus suis infection, featuring Thai and English subtitles, and was distributed exclusively via Tai Baan Studio's Reels and Facebook platforms. The film garnered over one million views within two months .

Objective: The purpose of this study is to analyze the script and apply communication models for the development of health communication, specifically: 1) the persuasive communication model, 2) the Elaboration Likelihood Model, 3) the Fear Appeal Model, 4) the Entertainment-Education model, and 5) the narrative structure of storytelling, to inform content production strategy and analysis.

Method: This descriptive study includes screenplay analysis, short film analysis, audience engagement by age, generation, and location, and comment analysis. Findings indicate that storytelling that integrates Tai Baan's distinctive entertainment style and cultural identity effectively facilitates health communication.

Conclusion: This study offers recommendations for communicating effective disease prevention through short films and production design, thereby promoting greater understanding and readiness to change behavior.

Implications: In conclusion, delivering health information in the audience's language and in an accessible manner can enhance the effectiveness of public health communication.

***Keywords*:** Edutainment, Health Communication, Streptococcus suis infection

Contemporary health communication faces significant challenges from misinformation and rumors. To encourage individuals to adopt safer health behaviors, messages must be accurate, trustworthy, straightforward, and accessible. Community involvement further facilitates the dissemination of these behavioral changes. According to the Department of Disease Control, between January 1, 2024, and January 5, 2025, 956 cases of Streptococcus suis infection were reported, resulting in 59 deaths (Department of Disease Control, 2025). This infection, prevalent in the Northeast and northern regions of Thailand, is associated with the consumption of raw pork. Symptoms include high fever, severe headache, dizziness, hearing loss, and, in severe cases, death. Risk factors include consuming raw dishes, sharing utensils, and the misconception that lemon juice or alcohol can eliminate pathogens. Previous government communication efforts were limited and lacked engagement. In response, a short film was collaboratively developed by the Department of Disease Control and Tai Baan Studio, drawing on local perspectives to enhance audience engagement. The following sections provide an overview of the film's creation and context.

Taibaan Studio is recognized as a leading filmmaking company in Thailand, distinguished by its original style that renders local Esan culture accessible and relatable. The studio has produced a diverse portfolio, including music, music videos, and affiliated actors, all under the Tai Baan Universe franchise.

The short film initiative was informed by medical data from the Department of Disease Control. The production team aimed to develop a collaborative communication strategy to raise awareness and engage a broader audience through an appealing and enjoyable format. The

primary objective was to foster a community of viewers and promote behavioral change, rather than solely maximizing viewership.

Health communication through entertainment media: A case study of the short film "Raw Pork, Deafness, Do You Know?" by Tai Baan x Department of Disease Control, published on Reels and Facebook of Tai Baan Studio. Main Team, which consists of Executive Producer - Chaiyaphol Namwong and Surasak Pongson, Producer – Kunphas Komanee, Scriptwriter – Dr.Oubonpun Werajong DVM., MD., Occupational Physician, and also Veterinarian from the Department of Disease Control, Director – Boonchok Srikhum, Cast - Thiti Srinuan / Therdkiat Noimara / Anuchit Songsri / Boonyarit Jantayukanto / Yotsapon Panalai / Pullarp Tha nee / Praewa Taiyang, and Production manager – Pokpong Makornnan. In the following section, we outline the narrative structure used in the short film to support its health communication goals.

Narrative Structure of the Story

Act 1 - The main character, a member of the film crew, suddenly becomes deaf and gets a fever. It is found that this happened after eating raw pork at a party.

Act 2: Scenes explicitly show the risky behaviors—such as consuming raw pork—highlighting practices that lead to infection. These visuals illustrate the cause of the protagonist's illness in Act 1.

Act 3 – The narrative unfolds the incident, explaining the reasons for the protagonist's survival and examining the impact of illness on life and work, as reflected through the emotional perspective of the director, who leads the film crew.

Act 4 - Ending: Give a clear message about the harm of eating raw pork and share ways to avoid it. It finishes with a display of tasty cooked food and a main message from the film's main influencer.

The short film is presented in Isaan, with Thai and English subtitles. Both the 10-minute and 7-minute versions of "Raw Pork, Deafness: Do You Know?" are available at https://www.facebook.com/TaiBaanOfficial (TaiBaan Official, 2025).

Literature Review

Streptococcus suis infection is associated with the consumption of raw or undercooked pork and with unsafe handling of potentially contaminated pork products (Department of Disease Control, 2025). After a case or death is reported, epidemiological investigations should examine the probable source of exposure, the patient's beliefs, food-preparation practices, and relevant community behaviors. Common misconceptions include the belief that consuming raw pork with alcohol or lime juice can eliminate the risk of infection. Risky practices may also include using the same utensils or cutting boards for raw and cooked foods. In addition, cases may occur in clusters associated with communal meals, celebrations, or parties. These patterns indicate that disease prevention requires communication strategies that address not only knowledge gaps but also culturally embedded beliefs, social norms, and shared eating practices.

Social media can play an important role in increasing public awareness and promoting preventive behavior. Although Panpeng's (2020) study focused on noncommunicable diseases, it demonstrated how social media could support health awareness and health-promoting behavior under the concept of "Building health leads fixing health." Similarly, Sathawornwiwat et al.

(2020) identified several predictors of raw-meat consumption, including knowledge, beliefs, meat prices, community rules and social norms, role models among friends, and advice from health personnel and village health volunteers. These findings suggest that campaigns should address both individual determinants and the broader social environment in which food-related decisions are made.

Prabkachen (2025) demonstrated that an integrated community-based strategy combining health literacy development, risk communication, communication technology, resource management, and community collaboration could strengthen the prevention of *Streptococcus suis* infection. The study also emphasized that sustained behavioral change requires continuing monitoring and reinforcement.

Entertainment-education (EE), also known as edutainment, offers an appropriate strategy for communicating these messages. EE integrates health, educational, and prosocial content into engaging forms of popular entertainment, including television drama, short films, music, and digital games. Rather than presenting health information only through direct instruction, EE seeks to influence beliefs, social norms, and behavior while maintaining the audience's entertainment experience (Riley et al., 2021; Singhal & Rogers, 1999).

The short film *Raw Pork, Deafness: Did You Know?* can therefore be understood as an EE intervention that incorporates disease-prevention messages into an entertaining narrative designed for audiences at risk of consuming raw pork (Taibaan, 2025).

The campaign may also be interpreted through established communication and persuasion theories. Berlo's (1960) source–message–channel–receiver model can guide the

alignment of a credible health-information source, an understandable message, an appropriate communication channel, and a clearly defined audience.

The elaboration likelihood model suggests that campaigns may combine evidence-based health information with engaging characters, humor, emotion, and other narrative cues to encourage both thoughtful and affective processing of the message (Petty & Cacioppo, 1986).

Protection motivation theory further suggests that preventive communication should explain the severity of the disease and the audience's susceptibility while also emphasizing the effectiveness and feasibility of recommended preventive actions, such as avoiding raw pork and separating utensils used for raw and cooked food (Rogers, 1975).

Methodology

This descriptive study employs screenplay analysis, short film analysis, audience engagement analysis by age, generation, and location, and comment analysis. After the film was released for 2 months, the researchers sought to determine how health messages are embedded in engaging narratives rather than presented as lectures or directives, thereby facilitating audience understanding among the large number of viewers who had not planned to engage in this research beforehand. The number of audience responses was unexpected and unbelievable. The messaging is tailored to the local context and disseminated through social media groups focused on disease-related topics. This short film exemplifies a Thai-style health media production strategy that influences message reception. The study evaluates the effectiveness of disease awareness and prevention by analyzing communication patterns and models within the film to identify factors contributing to its success. The analysis aims to inform the development

of future health campaign materials. Qualitative content analysis was conducted by transcribing movie scripts and reviewing the published short films. Viewer feedback, including comments and view counts, was analyzed to assess narrative structure, language use, symbolism, production design, storytelling tone, communication channels, and audience responses on online platforms.

The short film "Raw Pork, Deafness: Do You Know?" analyzes the script. Using the theory of health communication through entertainment media in various dimensions via the Hybrid Communication Model, including:

1. Persuasive Communication Model, in its main components, namely sender, message, channel,and receiver, and effect evaluation, is the basic structure of Berlo's SMCR communication model (Berlo, 1960).

2. Elaboration Likelihood Model (ELM) to consider the central route and the peripheral route in the story to determine whether there is consistency and accessibility to entertainment reasoning (Petty & Cacioppo, 1986).

3. Fear Appeal Model: Consider creating a rational fear pattern and providing options and solutions to achieve communication success. There are elements of Threat, Severity, and Efficacy (Rogers, 1975).

4. Health communication strategies put social and health messages into entertainment (Entertainment–Education: E–E) (Singhal & Rogers, 1999).

Results

The following section analyzes communication styles within educational models based on key elements of Health communication.

1. The Persuasive Communication Model comprises several elements. The sender and screenwriter is a physician from the Department of Disease Control, Ministry of Public Health. The model utilizes academic data from the Division of Communicable Diseases, news from the Department of Disease Control, and media from the Office of Risk Communication and Health Behavior Development. Data on Streptococcus suis infections include case counts, mortality rates, and patient distribution. Additional information addresses gender, age, region, risky behaviors, symptoms, and patient medical histories. Solutions are presented to the public in collaboration with the Tai Baan team, which emphasizes Isaan culture in the target area. The Tai Baan team, consisting of messengers and producers, serves as an intermediary to build cultural trust and collaborate on all aspects of the short film's messaging. The messenger is highly credible among state authorities. Messages integrate factual information and health warnings to address misconceptions, such as the belief that adding lemon to pork or consuming alcohol eliminates pathogens. Rather than directly stating that these beliefs are incorrect, the communication clarifies that consuming raw pork still results in adverse health effects. Behavioral warnings advise when to seek medical attention, identify symptoms requiring urgent care, and specify information to provide to healthcare professionals. The tone remains persuasive rather than forceful. Communication channels include Facebook, featuring 10-minute Reels and a shorter 7-minute version. Target audiences are located in the Northeast and North regions, as well as individuals working abroad who engage in risky behaviors, such as consuming raw or

undercooked pork and holding inaccurate beliefs. Anticipated outcomes include correcting misconceptions about consumption, reducing intake of raw pork, increasing awareness of risk symptoms, preventing disease, and facilitating message dissemination.

2.Elaboration Likelihood Model (ELM): The narrative employs both the central (rational) and peripheral (emotional) routes. The central route targets viewers interested in disease information, emphasizing symptoms, timely treatment, and serious outcomes such as permanent deafness or death, while providing preventive recommendations. The peripheral route utilizes emotional engagement to capture attention and encourage word-of-mouth dissemination, incorporating humor, familiar settings, and culturally specific characters from the Thai film universe "The Undertaker." Emotional elements such as love, persistence, humor, teasing, and shyness are used to sustain audience interest and openness to the content.

3. The Fear Appeal Model consists of three components. First, the threat is represented by illness, specifically ear loss. Second, severity is conveyed through narrative elements such as the phrase "Extinguished, extinguished" and repeated references to losses, including "losing your job," "losing your future," and "losing your life." Third, efficacy is demonstrated by recommending practical, easily adopted disease prevention methods, such as thoroughly cooking pork and using separate chopsticks when eating pork pan. The narrative's strength lies not only in instilling fear but also in providing clear, effective solutions, emphasizing that prevention must occur before disease onset. The story highlights that illness can affect not only individuals but also those around them, and that group illness is associated with communal eating behaviors.

4. The Entertainment–Education (E-E) Model integrates disease-related content into an engaging narrative. In this approach, the characters, portrayed as older brothers, express concern,

provide information, and offer care, guided by the director. Rather than relying on a doctor or medical professional, a team member who is personally affected by illness resulting from raw pork consumption delivers the message. The narrative reinforces accurate cultural beliefs in real-life contexts, such as parties, merit-making events, and communal meals, to enhance recall and relevance.

5. The narrative structure presents a sequence of events that retrospectively examines the causes of disease and draws conclusions. It addresses misconceptions, such as the belief that denatured protein from lemon juice prevents disease. The narrative clarifies that consuming semi-raw pork and cross-contamination of utensils can lead to infection, and highlights warning symptoms that should prompt individuals to provide relevant medical history to physicians. All medical information is grounded in statistics and disease investigations, forming the basis of a scripted screenplay authored by a physician from the Department of Disease Control. The use of friendly comedy, improvised dialogue by skilled actors, and the director's distinctive style helps reduce public resistance to government messaging and fosters a positive response. Audience feedback indicates increased awareness, correction of previous misunderstandings, and a willingness to change behaviors associated with disease risk.

The narrative can be structured as follows: Act 1 introduces the protagonist, who has lost an ear and is ill, and provides historical context indicating that the illness resulted from consuming raw pork. Act 2 depicts the act of eating raw pork and illustrates the risky behaviors that led to the outcome in Act 1. Act 3 explains the reasons for survival despite illness. Act 4 summarizes the narrative, emphasizing the negative consequences of raw pork consumption and outlining preventive measures. The conclusion features imagery of appealing cooked food and

incorporates a memorable, humorous element. The closing caption, "Raw Pork, Deafness, Do You Know? This risks life and can be prevented," is designed to be catchy and easily recalled.

Discussion

The short film establishes an intimate and authentic atmosphere, immersing viewers in settings that reflect daily life in Isaan communities. From the beginning, the film depicts vibrant local gatherings characterized by shared meals, lively conversations, and cultural traditions. The cinematography highlights aspects of local culture, including the presentation of freshly cooked food and the expressive reactions of the cast during moments of joy and concern. This naturalistic approach reduces the perception of artificiality, offering a realistic portrayal in which the risks of consuming raw pork are presented as tangible concerns within a valued cultural context.

Throughout the narrative, the film maintains a balance between humor and seriousness. Jokes are integrated into the dialogue, eliciting laughter while reinforcing the importance of the health message. Scenes transition smoothly from playful interactions to moments of concern as symptoms emerge, capturing the emotional dynamics of sudden illness within a close-knit community. The absence of hierarchical relationships and the replacement of authoritative lectures from the doctor with caring advice from peers fosters trust and approachability. Performances are subtle yet expressive, with each actor portraying characters whose reactions appear spontaneous and authentic. The director's approach allows scenes to unfold at a natural pace, enabling the audience to absorb both the information and the emotional tone of each moment.

This strategy frames the film's core message—that prevention is achievable and positive change is possible—as empowering rather than intimidating. By integrating health communication into the language and daily routines of Isaan communities, the film reduces resistance and encourages viewers to reflect on themselves. As a result, the narrative is both informative and memorable, supporting its dissemination within the community and fostering collective action.

Audience number of the short film

From December 30, 2025, to April 6, 2026, the total number of views for the short film audience engagement is 1,168,000, exceeding the target. The number of views and feedback data is as follows:

The short film, a 10-minute version, has 989,208 views, 39,044 reactions, 152 comments, and 887 shares.

The short film, the 7-minute version, has 179,445 views, 5,381 reactions, 15 comments, and 198 shares.

Total across both formats: 1,168,653 views, 44,425 reactions, 164 comments, and 1,085 shares.

The number of views and response data for short films published on Reels (TaiBaan Official, 2025) only.

A closer look at the audience demographics reveals a distinct pattern: a majority of viewers are men, reflecting the film's resonance with male audiences who may also be more engaged with the topic of raw pork consumption. The most attentive viewers fall within the age brackets of 25-34, 18-24, and 35-44, respectively. These age groups represent young adults at

the threshold of independence as well as more established adults, both segments likely to participate in social gatherings and communal meals where risky food habits may occur.

Geographically, the film's reach spans all parts of Thailand, but it is particularly prominent in five provinces: Bangkok, Chonburi, Khon Kaen, Ubon Ratchathani, and Nakhon Ratchasima. In Bangkok, the bustling capital, the film’s message finds an audience among urban dwellers who are connected by social networks and exposed to diverse eating traditions. Chonburi, a dynamic province with a mix of local and migrant workers, also records high viewership, suggesting the film’s relevance beyond its Northeastern roots. In Khon Kaen, Ubon Ratchathani, and Nakhon Ratchasima, the major provinces of the Isaan region, the story resonates deeply, echoing local customs and culinary practices. The widespread engagement across these areas highlights the film’s ability to bridge cultural and generational divides, bringing public health awareness to a broad and varied audience.

Audience comments indicate a lack of awareness regarding the potential for death or permanent hearing loss from the disease. Many viewers express intentions to inform family members about the health effects and preventive measures. Additionally, some members of the acting team respond directly in the comment sections, providing explanations about the disease and its severity. This direct, two-way communication fosters a sense of community focused on disease awareness and prevention.

Viewers participate in a variety of comments, both fun and previously unknown, such as not knowing they can die or become permanently deaf, as well as sharing with family members the effects of the disease on health and how to prevent it. However, Statistics of illness must be

collected for the same period, so the figures from the relevant agencies have not been disclosed at this time.

However, during the period of publication, there was no news of mass illness among the people, which is different. Compared to the same period in the previous year. Increasing visits to the doctor and providing a timely history of treatment before severe disease develops can be considered a positive impact. from communication because it can prevent deaths.

Conclusion

This study suggests ways to communicate effective disease prevention through a short film, with proper details on mood and script tone, and through production design to promote greater understanding and readiness to change behavior. Story tone and film production design are shifting from persuasion without coercing the audience's emotions toward risk awareness and readiness to change. Policy Recommendations as 1. There should be studies and the development of health promotion models through storytelling, and expanded cooperation with manufacturers that have an identity and specialization in communication, professionalism, and expertise, in a clear way to enhance accessibility and cost-effectiveness in production and communication. 2. It is better to use visual storytelling rather than direct narration because it is more effective and clearer. 3. Communication should include the local language, subtitles, and sign language to provide additional access for the visually impaired. 4. Further studies should be conducted on the morbidity and mortality rates of Streptococcus Suis infection, and the cost-effectiveness of communication should be assessed using the principles of public health economics.

For implementation suggestions:

1. It should be used as a model for creating health media for other diseases.

2. It can be republished an unlimited number of times. In various forms and channels, such as cutting specific segments, making funny memes, and making behind-the-scenes clips, to create public awareness and attention. During the gathering of the people. Long weekends spent in combination with meals or parties are often driven by unhealthy behaviors.

3. Be careful in interpreting the results of people's illnesses. Because both morbidity and mortality rates must be interpreted. In diseases where people change their behavior from the original wrong to the right behavior. Higher rates of medical visits and illness rates can be found. Because the public can observe the symptoms and give a clear history. This allows doctors to treat and diagnose the disease in time. Although the number of cases increases, the death rate will decrease. Therefore, education through various media can also help reduce the death rate of the people.

4. It can be used as teaching material for students and communicators. 5. Expand distribution channels and utilize other transmedia formats.

In conclusion, the analysis indicates that effective health communication relies not solely on academic content, but on translating health information into culturally resonant language. Tai Baan and LOOKESAN serve as cultural mediators, bridging academic knowledge with everyday experiences. The film employs a tone and narrative style that appeals to the public, leveraging the actors' unique skills, accessible scripts, and a balanced use of humor and fear. The collaborative efforts between Tai Baan and the Department of Disease Control have fostered innovation and mutual learning in health communication. The short film "Raw Pork, Deafness,

Do You Know?" exemplifies successful integrated health communication by combining communication theory, medical accuracy, and Thai cultural identity to promote awareness, understanding, and sustainable health behavior change. This case study underscores the importance of understanding the audience's cultural context and establishing an emotional connection alongside the delivery of academic information in the digital age.

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