Planning for the 2004-05 Influenza Vaccination Season: A Communication Situation Analysis

Glen Nowak, Ph.D.
Associate Director for Communications
National Immunization Program
Overview

• My goal
• A Quiz
• A Brief 2003-04 Communications Review
• The communications recipe for success
• 2004-05 Communication Plans:
  A Brief Overview
My Goal

To broaden understanding and thinking about influenza vaccination communication—especially when it comes to greatly increasing coverage.
Quiz Question 1

• April 7, 2004 was World Health Day. What was the theme or focus of this year’s event?
• How many people in the U.S. are killed annually by the thing that was focused on in this year’s event?
Answer: Road Traffic Safety

- In the U.S. alone, 40,000 people are killed in road traffic crashes and another 4.5 million are injured each year.
- Road traffic injuries are the leading cause of death for Americans between 4 and 33 years of age.
Quiz Question 2

“It strikes 2 million Americans each year. And complications from this kill up to 200,000 people a year-- more people than breast cancer, car crashes, and AIDS combined. The good news is, in most cases, this can be prevented.”

What is it that causes this harm?
Stop A Deadly Killer

It strikes 2 million Americans each year and kills more people than breast cancer, car crashes and AIDS combined, yet most of us do not even know its name. The condition is called deep vein thrombosis, or DVT. It begins with a blood clot in the leg that can travel to the lungs, causing a pulmonary embolism and often death. Many of us are at risk—just sitting for a long time on a plane can produce DVT. But older people, pregnant women, smokers, the obese and others with a condition that limits mobility are at increased risk. Symptoms include leg tenderness, pain, swelling, discoloration or redness. If you suspect DVT, call a doctor immediately. There are quick, non-invasive tests to identify it, plus options ranging from blood thinners to simple exercises. National DVT Awareness Month begins tomorrow. Go to www.preventdvt.org to learn more.
Quiz Question 3

TRUE or FALSE?

“When it comes to the 185 million people that we recommend receive an annual influenza vaccination, they are all pretty alike when it comes to their influenza vaccination-relation knowledge, beliefs, and intentions.”
FALSE

• So how do they differ?
• How should we characterize/segment different people into different groups to facilitate: a) identifying interest or concerns regarding influenza vaccination; b) developing effective messages and materials, and c) reaching them with those messages and materials?
A Communication Review: 2003-2004 Flu Season
Posters for the Public

You can stop INFLUENZA before it knocks you flat.

Get vaccinated.

Top 3 REASONS to get your flu vaccine

1. Prevents influenza-related death.
2. Prevents severe illness.
3. Protects other people.

Proteja a sus Niños de La Influenza

Centers for Disease Control and Prevention
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Provider Materials

Are you ready?

Influenza season is here

Get an influenza vaccination
An annual flu shot can help protect you, your patients, your colleagues and your entire community from influenza.

Vaccinate your patients
Encourage your patients to get an annual flu vaccination and remind them that more people die from the flu than any other vaccine-preventable disease. Most of those deaths are in people 65 and older.

Protect your community
Promote the flu vaccine throughout the influenza season (October-March). The CDC is offering a free health provider kit with bilingual materials for your patients.

Click onto www.cdc.gov/flu/hcp for a free provider kit. For more information on influenza, www.cdc.gov/flu or call 1-800-232-2622

Centers for Disease Control and Prevention
Department of Health and Human Services
2003-04 Flu Season: Key Time Points

- **September**: NFID Press Conference at D.C. Press Club (Sept. 23)
  - Initial reports of flu activity
  - Initial reports of pediatric deaths
  - "Worst Flu Season in 30 years" predicted

- **October**: Flu activity continues to increase, along with sense that Fujian strain is causing more severe illness
  - CDC learns all doses of inactivated vaccine are soon to be distributed (Dec. 3)

- **November**: Most of U.S. has widespread flu activity
  - CDC materials distributed to variety of partners
  - National Adult Immunization Week (12-19)

- **December**: Immunization efforts still going strong
  - CDC learns all doses of inactivated vaccine are soon to be distributed (Dec. 3)
  - Most of U.S. has widespread flu activity

- **January**: More reports of pediatric deaths
### The Immediate (and ultimately predominant prevention) Messages (Sept. 21-28)

<table>
<thead>
<tr>
<th>Message</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctors recommend/urge flu shot</td>
<td>285</td>
</tr>
<tr>
<td>Flu kills 36,000 per year</td>
<td>221</td>
</tr>
<tr>
<td>There will be plenty of vaccine this year</td>
<td>177</td>
</tr>
<tr>
<td>This could be a bad/serious flu year</td>
<td>174</td>
</tr>
<tr>
<td>Flu Mist availability</td>
<td>173</td>
</tr>
<tr>
<td>Flu vaccine best defense against flu</td>
<td>149</td>
</tr>
<tr>
<td>Flu vaccine prevents disease</td>
<td>135</td>
</tr>
<tr>
<td>Oct/Nov/Dec is best time to get vaccine</td>
<td>117</td>
</tr>
<tr>
<td>Flu vaccine arrived/available</td>
<td>114</td>
</tr>
<tr>
<td>Now is good time to get flu vaccine</td>
<td>106</td>
</tr>
</tbody>
</table>

(n=1056)
Flu Season 2003-2004

News Message – Outbreak/Disease Widespread

Daily newspaper stories
Flu Season 2003-2004

News Message – Could be a bad/serious flu season

Mayo Clinic Press Release featuring a prediction from Dr. Greg Poland

Daily newspaper stories
Flu Season 2003-2004

News Message – Vaccine does not have the same viral strain as circulating flu virus

Frequency
Flu Season 2003-2004

News Message – Child death reported from Flu

Frequency

Nov. 30-Dec. 6
Dec. 7-13
Dec. 14-20
Dec. 21-Dec. 27
Dec. 28-Jan. 3
Jan. 4-10
Jan. 11-17
Jan. 18-24
Jan. 25-31

newsprd
Flu Season 2003-2004

News Message – Adult/elderly death reported from Flu

Frequency

newsprd
Flu Season 2003-2004

News Message – Flu kills 36,000 people per year

Frequency

June 15-21
Sept. 21-27
Sept. 28-Oct. 4
Oct. 5-11
Oct. 12-18
Oct. 19-25
Oct. 26-Nov. 1
Nov. 2-8
Nov. 9-15
Nov. 16-22
Nov. 23-29
Nov. 30-Dec. 6
Dec. 7-13
Dec. 14-20
Dec. 21-27
Feb. 22-28

newspr
 Flu Season 2003-2004
Number of Influenza Stories by Week

Frequency

June    July   August  September  October  November  December  January  February  March
0       0       0       0          0        0         0         100      200      0
Getting Ready for 2004-2005: Lessons (Re-)Learned
[Including the Seven-Step Recipe for Generating Interest in, and Demand for, Flu (or any other) Vaccination]
Three Likely Population Segments

• People who routinely receive an annual influenza vaccination, including those we recommend do so
  – Primarily 65 years old and older
  – Primarily get vaccinated in Sept-November

• People who sometimes receive an annual influenza vaccination, including those we recommend do so
  – Interest is often contingent on perceptions of severity of the strain, likelihood they or someone they know will contract it
  – Appear to get vaccinated later (November, early December)

• People who choose not to get an influenza vaccination, including those we recommend do so:
  – Inversely related to age (e.g., most likely 18-49)
  – Among older people, often based on a firmly held belief/conviction
Many People Don’t Get an annual Influenza Vaccination

- Overall, 35% (of 1,001 surveyed) said they got or planned to get a flu vaccine, while 65% did not (AP/Ipsos survey)
- 40% of respondents age 50-64 said they had received a flu vaccination in past three months (Harvard)
- About 47% with chronic illnesses did not get a flu vaccination (Harvard)
- Seven in 10 parents said they did not have their children vaccinated (AP/Ipsos)
- 78% of parents of children 6-23 months had not had their child vaccinated, though 74% said they were aware of the recommendation (Harvard).
“Recipe” that Fosters Higher Interest and Demand for Influenza Vaccine (1)

1. Influenza’s arrival coincides with immunization “season” (i.e., when people can take action)

2. Dominant strain and/or initial cases of disease are:
   – Associated with severe illness and/or outcomes
   – Occur among people for whom influenza is not generally perceived to cause serious complications (e.g., children, healthy adults, healthy seniors)
   – In cities and communities with significant media outlets (e.g., daily newspapers, major TV stations)
“Recipe” that Fosters Influenza Vaccine Interest and Demand (2)

3. Medical experts and public health authorities publicly (e.g., via media) state concern and alarm (and predict dire outcomes)– and urge influenza vaccination.

4. The combination of ‘2’ and ‘3’ result in:
   A. Significant media interest and attention
   B. Framing of the flu season in terms that motivate behavior (e.g., as “very severe,” “more severe than last or past years,” “deadly”)
“Recipe” that Fosters Influenza Vaccine Interest and Demand (3)

5. Continued reports (e.g., from health officials and media) that influenza is causing severe illness and/or affecting lots of people—helping foster the perception that many people are susceptible to a bad case of influenza.

6. Visible/tangible examples of the seriousness of the illness (e.g., pictures of children, families of those affected coming forward) and people getting vaccinated (the first to motivate, the latter to reinforce)

7. References to, and discussions, of pandemic influenza—along with continued reference to the importance of vaccination.
Implications of “Recipe”

• A large component of consumer demand for flu vaccination is contingent upon things we can’t control (e.g., timing, severity, extent, duration of the disease and resulting illness).

• Vaccination demand, particularly among people who don’t routinely receive an annual influenza vaccination, is related to heightened concern, anxiety, and worry. For example:
  – A perception or sense that many people are falling ill;
  – A perception or sense that many people are experiencing bad illness;
  – A perception or sense of vulnerability to contracting and experiencing bad illness.
Influenza Immunization
Communication Challenges (1)

• The easiest people to effectively communicate with are in Segment 1, but they already convinced about the value and benefits of annual influenza vaccination.

• Persuading people in Segments 2 and 3 to change behavior is quite challenging – e.g., they are more skeptical about influenza consequences, vaccination need and benefits, effectiveness of influenza vaccine, etc. and often hold their beliefs quite firmly.

• Achieving and maintaining public and media interest in the 6th or 7th leading cause of death

• Effectively addressing parent concerns about a) the number and timing of vaccinations and b) thimerosal
Influenza Immunization
Communication Challenges (2)

• Some component of success (i.e., higher demand for influenza vaccine) stems from media stories and information that create motivating (i.e., high) levels of concern and anxiety about influenza.

• Inducing worry, raised anxiety, and concern in people brings forth a number of issues and presents many dilemmas for health care professionals.
And can leave you searching for the “Holy Grail” of Health Communication (Lanard and Sandman, 2004)

The belief that you can inform and warn people, and get them to take appropriate actions or precautions with respect to a health threat or risk without actually making them anxious or concerned. (Remember the quiz?)

This is not possible. Rather...

“This is like breaking up with your boyfriend without hurting his feelings. It can’t be done.”
Influenza Immunization
Communication Challenges (3)

• It’s hard to create motivating levels of concern and anxiety about influenza-- and thus interest in influenza vaccination-- when:
  – disease severity and impact are in line with people’s/media expectations
  – Perceived or actual vaccine effectiveness doesn’t meet the expectations or standards of those for whom vaccination is recommended (fortunately, evidence of effectiveness helps)
CDC’s Next Communication Steps

- Finalize communication “lessons learned” from 2003-04
- Develop and implement 2004 survey and focus group communication research plan (e.g., 50-64 year olds, parents)
- Update/revise 2003-04 materials, including evaluation of provider resource kit
- Continue to put a face on influenza through the use of a wide array of faces and people
- Develop comprehensive 2004-05 influenza communication plan and timetable
We welcome, need, and rely upon your involvement in influenza vaccination communication efforts

• Contact Kari Sapsis, NIP OC’s influenza immunization campaign project manager (e.g., via e-mail, ksapsis@cdc.gov)
Additional Slides
Preparing for the 2004-2005 Influenza Season: Recent Survey Findings that Need to be taken into Account
Recent Influenza Vaccination Surveys

• Healthstyles panel survey, June 2003,
• RoperASW/NFID telephone survey, Sept. 26-28,
• Healthstyles Recontact panel survey, October, n=4,368
• Associated Press-Ipsos Poll, Dec. 15-17, n=1001
• Harvard telephone survey #1, Dec. 12-16, n=1,037
• Harvard telephone survey #2, Dec. 17-21, n=1,046
• Harris Interactive / Wall Street Journal online surveys:
  – December 18-22, 2003, n=1,792
  – Jan. 6-8, 2004, n=2,378
Most people 65 and older get or are inclined to get an influenza vaccination. . .

- 82% of those 65 and older said they get a vaccination (vs. 56% or less for other age groups) (Roper/NFID)
- 85% of people 65 and older had been vaccinated (46%) or planned to get vaccinated (39%) (HealthStyles)
- People 65 and older were most likely to have received an influenza vaccination this fall (75%), vs. 44% of people between 50 and 64. (AP/Ipsos Survey)
- 71% of people 65 and older indicated they have received a flu shot this season (Harvard survey)

(Note: None of the surveys included senior citizens living in nursing homes or other care facilities)
Most people believe they are well informed about influenza and flu vaccination. . .

• A Roper/NFID national survey found:
  – 84% said they were aware that flu can be prevented by vaccination
  – 94% were aware that flu can lead to hospitalization and possibly death
  – 77% were aware that healthy people need to get a flu vaccination
  – 75% were aware that December was not too late to get a flu vaccination

• Most respondents in October 2003 Healthstyles survey said they were “well informed” about:
  – Who should receive an annual flu vaccination (68%)
  – About the vaccine’s benefits and risks (62%)
Especially people 65 years old and older. . .

- 87% of people 65 and older said they were “well informed” about who should receive a flu vaccination, with 84% saying they were “well informed” about the vaccine’s benefits and risks (HealthStyles).
- 93% of respondents 65 and older in Harvard survey indicated that the “CDC highly recommends Adults 65 and older” get the flu vaccine (Note: 75% of the respondents 50-64 were aware of the recommendation for Adults 50-64).
- 76% of respondents 65 and older said they had recently read or heard something about flu shots or vaccine in the media recently (HealthStyles).
Most People Believe Influenza is a Likely Health Threat

- Many (42%) believed that someone in their household would catch the flu this winter (Roper/NFID).
- Most (81%) perceived SARS to be a serious illness, but nearly half (46%) said it was not as serious as others viruses like the flu. (Roper/NFID)
- Overall, 62% of respondents were concerned that they or a family member would get the flu in the next three months (and about 19% indicated having the flu in the past 12 months). (HealthStyles)
Most people who choose not to get a flu vaccination have more than one reason
(HealthStyles Fall Survey)

- 26% said they did not need a flu shot
- 24% cited concerns about allergic or other reactions
- 23% said no health professional had recommended
- 22% said they did not believe they were likely to get the flu
- 18% said they did not think the illness caused by flu was serious enough to get vaccinated
- 15% said they did not believe the flu vaccine was effective
- 9% said they were not know if they needed it
Health Segments: People 40 and older
(Morgan and Levy, 2002)

• **“Proactives”** (33%/39%) – work to stay healthy, using health information, trust in doctors, convinced that drugs will have positive effect

• **“Faithful Patients”** (26%/21%) – not doing what they should, lack follow through, trust doctors and medicines, prefer specialists

• **“Optimists”** (20%/21%) – believe they are in good health, avoid medicines, exercise, fatalistic with respect to bad health outcomes, trust physicians

• **“Disillusioned”** (21%/20%) – greatest concern is lack of adequate health insurance, feel alienated from physicians, often lack easy access to healthcare, concerned about side effects and adverse reactions
Heading into 2004-2005, we leave behind...

- “Past Season’s Flu Worst in 4 Years” (Washington Post, April 9)
- “CDC: Flu Season not as bad as expected” (Holland, MI, Sentinel, April 9)
- “Flu Season Turns Out to Be Fairly Typical” (Associated Press, April 9)
- “CDC: U.S. Flu Season Typical” (Atlanta Journal Constitution, April 9)
- “Flu Season was Typical” (Topeka Capital World, April 9)
Flu Communication Planning Goals

• To create a common understanding of the communication issues and challenges facing us.

• To increase the level of “sophistication” and critical thinking used to formulate communication plans and activities with respect to influenza vaccination – *persuading people to change behavior is usually hard to do.*

• To sharpen and help focus the limited resources we have to do influenza communication.
Flu Season 2003-2004

News Message – Doctors recommend/urge flu shot
Flu Season 2003-2004

News Message – There will be plenty of vaccine this year
Flu Season 2003-2004

News Message – Flu season arrived early

Newsprd