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**COMMISSION STAFF WORKING DOCUMENT
on communicating with the public and the media on Pandemic (H1N1) 2009**

Accompanying document to the

**COMMUNICATION FROM THE COMMISSION TO THE COUNCIL,
THE EUROPEAN PARLIAMENT AND THE EUROPEAN ECONOMIC AND
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Pandemic (H1N1) 2009

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INTRODUCTION

There is a broad consensus that, in the event of the EU facing a major health threat, the EU and its Member States should seek to be transparent and to share information in their dealings with the press, the general public, main stakeholders and health professionals.

Since 2006, a network dealing with international influenza pandemic communication issues has developed good working relationships (which are vital in a crisis, when rapid reaction and trust are needed) and ways of exchanging a wealth of experience. Practical exercises¹ have pinpointed important issues, such as giving the network a clear mandate and establishing sound communication procedures and efficient tools.

With Pandemic (H1N1)2009 expected to pick up pace from the autumn onwards, disease mitigation and the development of vaccines play an important role. Indeed, developing and using a vaccine effective against the Pandemic (H1N1) 2009 influenza virus can be viewed as one of the most effective public health measures. Meanwhile, pending the general availability of vaccines, personal protective measures such as hand hygiene and social distancing will be important. To achieve an adequate uptake of vaccines among risk groups and to deal with other prevention and vaccination-related problems, public health authorities across Europe will face challenges communicating with their national media, with the need for a carefully planned communication strategy.

The information that public health authorities will have to provide regularly will vary from country to country as the pandemic will develop differently across the EU. One thing to remember, though, is that anything that is fed to the media in one Member State will impact on media interest in the other Member States. This will bring with it the need for continuous trust building and sharing of messages to the media and the general public.

PURPOSE AND OBJECTIVES

This Commission Staff Working Document seeks to outline a possible EU-wide communication strategy, coordinated by the Commission and featuring joint elements, actions and tools. This paper sets out an operational plan for delivering targeted and scientifically validated messages for the general public and for specific risk groups. This will generate a number of common approaches (e.g. a joint press release, shared national media material and national communication plans and a joint information week) to the public, health care workers, other professional groups, and other specific target groups. This document is based on discussions and activities already initiated by the European Commission in conjunction with the Health Security Committee Communicators' network.

LEGAL BASIS

Community action in the field of public health, as set out in Article 152 of the Treaty, must complement national policies and be directed towards improving public health, preventing human illness and diseases, and obviating sources of danger to human health. The aim is to

¹ Reference: 2005, Common Ground, weblink.

tackle the major health scourges by promoting research into their causes, their transmission and their prevention, and to provide health information and education.

PUBLIC HEALTH BASIS

The distribution of accurate, objective and timely information at all levels is critical in terms of minimising social disruption and economic consequences and maximising the success of the response.

Communication is an essential element of crisis management. As well as empowering the public to adopt protective behaviour, good communication can facilitate case reporting and awareness, reduce confusion and make best use of resources. Good communication also helps maintain people's trust in the health authorities during an event.

From a communication perspective it is important to recognise that every individual has a role to play in this outbreak. Social distancing remains an effective way of reducing transmission, along with appropriate hygiene measures.

The public (health) authorities cannot of course stop a pandemic. The European Commission will support the national authorities and facilitate coordination with a view to mitigating the consequences of the pandemic, communicating and sharing the messages to the public, e.g. by way of regular audio-conferences and the regular updating via its Pandemic (H1N1)2009 website.

Conflicting messages or vaccination recommendations between Member States must be avoided, and any differing messages must be explained. It is essential to communicate factual information as soon as possible, to dispel any rumours, and regular updates must be provided as the situation unfolds and evolves.

There is often a tendency to rush to curb anxiety among the public. Just as important, though, is the need to curb complacency, i.e. giving people realistic expectations and a chance to take appropriate individual action.

EU HEALTH SECURITY COMMITTEE'S COMMUNICATORS' NETWORK — THE CORE OF THE EU COMMUNICATORS' STRATEGY ON PANDEMIC (H1N1) 2009

In June 2008 the Health Security Committee (HSC) endorsed the creation of the Health Security Committee Communicators' Network. Composed of press officers and spokespersons from national health authorities and EU agencies, this network held its first meeting in March 2009. Its mandate focuses on crisis communication in response to health threats, including chemical, biological and radio-nuclear threats, pandemic influenza and other major infectious diseases.

A guidance document (known as the Red Book) is intended to help members of the network to communicate better during normal and crisis times. It lists the members of the network, its terms of reference, standard operating procedures, and a guide to best communication practices.

The network provides a forum where crisis communication-related issues and practices can be exchanged, discussed and used for coordination purposes. All parties retain their ability to communicate independently.

The Commission stands ready to coordinate the communication strategies and messages on the response to the Pandemic, in order to maximise the impact of Member States activities and enhance coherence and clarity of the communication efforts. Any Member State can request the Commission to start a coordination process about an event.

Training courses and practical exercises for experts in communication have focused on shared communication goals and on interdependence between Member States during an emerging situation.

Since the beginning of the Pandemic (H1N1)2009 outbreak at the end of April 2009, the HSC Communicators network has been active in sharing information on media reports and giving advance warning to its members on press releases. As always happens in a health crisis, and has happened here too, the media ‘breaks’ stories ahead of confirmation from the authorities. The network reacted quickly to keep members informed of media reports and, more importantly, the reactions and plans of the national authorities to media stories. Recent months have shown that the network has a useful role to play in providing the EU scientific experts with information on the media and general public perception of national and international-level responses and decisions.

TARGET GROUPS FOR THE EU COMMUNICATION STRATEGY ON PANDEMIC (H1N1)2009

It is essential for information to be provided to the general population and to specific groups such as journalists, priority groups for vaccination and travellers. They need both daily and long-term information on how the pandemic is evolving and how they can protect themselves from the virus.

1. European citizens

European citizens, including civil society organisations, NGOs, etc, will get information at national and European level. EU action on the Pandemic (H1N1)2009 is essential to show that information management procedures are transparent. The population at large will receive leaflets, produced nationally and based on the EU templates on the SANCO web-page.

2. Journalists

Journalists are constantly looking for information on the way the situation is evolving. The media are the initial source of information, impacting on the way people think and react, so the media's message must be as accurate as possible. Having an agreed message and transparency on available information are essential means of pointing up the response and coordination measures by EU and national authorities. Similarly, ECDC is producing and circulating to the network ‘lines to take’ covering its technical/scientific outputs and risk assessments.

Journalists will get information and material for onward communication via the SANCO web page and via social networks and video platforms.

3. Young people

Young people are an important target group. Three new social media tools will be used to share concerns and the appropriate prevention measures: Facebook, YouTube and Twitter.

A daily short message platform on the pandemic might be interesting if it could be updated quickly: the EU Health portal and a new page for DG SANCO on Twitter might be a good way of doing this. E-cards will be made available on the EU Health portal for people to send informal e-mails with information on the pandemic to their contacts.

Podcasts and the pandemic clip competition will be announced and run on the SANCO Web pages.

One of the most effective responses would have to have an EU celebrity (widely known and respected across Europe) speaking about protective measures.

4. Priority groups

The Staff Working Document on vaccination strategy pinpoints the priority groups, including the essential services.

Priority groups will be defined and addressed differently depending on the context. Member States' approach will be based on specific national considerations. They will use whatever solutions they think best for protecting and informing their priority groups, adapting the tools and solutions proposed in the Commission Staff Working Document on vaccination strategy.

An item page on the SANCO web page will be dedicated to these priority groups, with information, advice and the latest news on the virus.

5. Travellers

Travellers are exposed in a different way to the pandemic and may require specific information on their country of destination. Here too, it is not specific travel that is being targeted, but rather links to validated websites across the EU. There will be leaflets available in airports and distributed by airlines.

STRATEGIC MESSAGE DEVELOPMENT

While it is not feasible for Member States to have identical messages on all aspects of the pandemic, it may be possible to agree some common strategic lines to take. These could include:

- A common view about the general level of risk posed by the virus — e.g. most people infected will experience only mild illness, but some will become seriously ill. There is no cause for undue alarm, but we should not be complacent.
- A common view about the challenges all Member States face — e.g. the pandemic is likely to cause some disruption and put significant pressure on health systems this autumn. We need to be ready for this.

- A common view on the value of public health input — e.g. we cannot stop the pandemic, but the measures we are taking will lessen its impact and help save lives.
- A common view about the need for EU cooperation — e.g. EU countries are coordinating their efforts and sharing information on a daily basis.

These messages reflect the state of play on the pandemic and its health, social and economic effects; moreover, they mirror the existing cooperation at European and international level. For the sake of good cooperation among all the actors involved and to avoid highly divergent messages vis-à-vis of the general public and the media, it would be helpful to highlight this common ground..

EXISTING COMMUNICATION AND INFORMATION TOOLS

There are already a range of communication tools for the public health management of the pandemic influenza. The national authorities, the European Commission, the ECDC, the EMEA and their spokespersons have all since 26 April 2009 provided frequent situation reports, daily press briefings and interviews, key points and recommendations, updated case counts on the web and held numerous meetings and conference calls with public health authorities and national spokespersons, webcasts, etc. All partners in this process kept a regular check – several times a day – on the media environment, the resulting information being distributed through various channels and websites, both nationally and at EU level.

SANCO Public Health website

As soon as the Pandemic (H1N1)2009 started, SANCO started providing information and updates of the situation on its website, with a dedicated page on the pandemic (http://ec.europa.eu/health/ph_threats/com/Influenza/novelflu_en.htm). At the height of the crisis, the site was up-dated several times a day, including weekends, with situation reports and news from the Commission, the ECDC, Member States and the WHO. The site currently contains news, epidemiological information, press material, a complete list of influenza websites in the Member States, videos and information on the Commission's role in a pandemic. The page is in principle available in 22 languages, although many documents and news items are only issued in English to speed up their publication on-line.

The EU Public Health Portal

On the homepage of the Portal, a logo and a link have been created to SANCO's dedicated website on H1N1 influenza. News published on the website is also announced on the Portal.

Portal Newsletter

A special edition of the Health Portal electronic newsletter was issued in May, focusing in the Pandemic (H1N1)2009. Subsequent newsletters have provided twice a month information to some 5000 subscribers.

MedISys and HEDIS

MedISys (Medical Intelligence System) is a 24/7, web-based early warning and alerting system based on European Media Monitor technology. E-mails breaking news alerts to subscribers.

HEDIS (Health Emergency & Diseases Information System) is used for information exchange and awareness during infectious outbreaks and health emergencies and response phases. It has a logbook of action taken, a repository, a database of models, maps and events.

ECDC communication outputs

ECDC also produces a number of regular communication outputs:

- ECDC dedicated web portal (updated regularly, with scientific evidence, guidance, news items, etc.)
- Daily situation reports
- Weekly pandemic surveillance report
- Weekly Pandemic (H1N1)2009 executive update
- Daily strategic media monitoring
- Key points to communicate /Lines to take (updated regularly)
- Scientific and technical documents on various topics
- *Eurosurveillance* articles
- Health education series documents and presentations (targeting decision makers and the general public)
- Webcasts (on various topics)
- Occasional press conferences on specific scientific topics

PROPOSALS FOR THE IMPROVEMENT AND DEVELOPMENT OF COMMUNICATION AND INFORMATION TOOLS

Some of the suggested proposals will require substantial finances and human resources.

Communication tools should be geared to the target audience and the message. Each target audience requires a separate communication plan. Language and style likewise need to be geared to the target audience.

Promotion activities of the following proposals are a key to success, and potentially resource-intensive needs will need to be considered when devising the communication plan.

1. Web-based information

With such rapid information turnover in the media and the widespread use of the internet and the new technology and communication tools, the EU has to be more present in the social media and web-based communications if it is to reach all communities.

The dedicated SANCO web page on Pandemic (H1N1)2009 will be strengthened to link directly to all the material produced and published on national websites (e.g. video clips, posters, leaflets, fact sheets, Q&As). It will be regularly updated so that the latest version is always available. It would help if the 'Europe-direct' service could call on the latest information for public callers. It is important for our national partners and agencies to send information for uploading onto the website as soon as it is published.

This strengthened website would have to be given a publicity boost within the EU institutions and throughout the European Union. A leaflet (distributed at airports, major train stations and in airplanes) and a web-based publicity message will be produced. Amassing communication

material from all over the EU, the website will be the prime example of the EU's coordination role.

A day-to-day short message platform on the pandemic response may be interesting if it can be rapidly updated; the EU Health portal will be used for this action.

The numbers of users in the EU of social networks is exponentially growing. One of the biggest user groups of these new and trendy communication tools is the young population, which will be a necessary target group for vaccination and school-related distancing measures. In particular Face book and video platforms such as You Tube, are essential tools to target the young population. The EC could register on it various messages, radio and TV spots on the pandemic and include the winner of the flu video-clip competition or spots made by MS.

E-cards are another trendy communication tool and allow easy and friendly information exchange. Citizens need to be made part of the information flow. By sending themselves e-mail to their mailing list they may reach people who don't have this kind of information. It's a solution to diffuse quickly information on a subject by reaching a larger population in its private sphere. Having E-cards available on the EU health portal seems to be a good way of diffusing information on the pandemic response to citizens.

2. Coordination of information to call centres

Member States have created call centres to deal with Pandemic (H1N1) 2009. Given the range and complexity of the questions, call centre workers must share the questions and answers and, where possible, issue the same messages to all citizens.

Sharing of information between MS call centres and giving same answers are essential to have an EU coordinated communication on the public health response to the pandemic. The information sharing of persistent rumours and their potential validity are of the utmost importance.

A common platform must be developed to enable call centres to search and input information and to allow accurate information or new concerns to be circulated quickly. The HSC will be invited to supervise the process and give appropriate answers and templates to call centres by creating a web-based information platform on HEDIS².

3. A collective response to Pandemic (H1N1) 2009

To demonstrate that there is a coordinated response across the EU, the Member States and the Commission might decide to have a special day dedicated to communicating specific messages on the H1N1 2009 situation, and protective measures.

4. Eurobarometer

If time allows, the European Commission would be prepared to launch a Eurobarometer survey on the way European citizens see Pandemic (H1N1) 2009.

² Reference, link to webpage.

ROLE OF PARTNERS

Communicators in the Member States already use a common information exchange platform (on HEDIS, where they can share and coordinate messages and action with each other, the ECDC and the Commission). Through MediSys³ and other media monitoring sources they are able to keep track of the latest developments in the press worldwide. This information is updated every ten minutes and offers machine translation from over 42 languages. SANCO web pages will provide essential reference information and a link to national websites. Leaflets are the next step in circulating these web- addresses with these reference pages on a national level. Thought will be given to using the HSC communicators' network to agree on common dates/timing of when to issue coherent Pandemic (H1N1)2009 messages to the general public.

The ECDC forms part of and supports the HSC Communicators Network. SANCO and ECDC will cross-reference each other's websites to make it easier to share epidemiological reports and management issues. More detailed vaccination-related questions and answers will be linked to the website of the European Medicines Agency (EMA). The Health Security Committee will be kept informed of any issue requiring further validation.

CONCLUSIONS

This Pandemic (H1N1)2009 outbreak poses complex communication challenges. Getting national communicators across the EU public health authorities to pool their resources is the best way to guarantee a transparent, shared and coordinated approach to the communication needs for the EU on the threat posed by the Pandemic (H1N1)2009 outbreak.

The best response to a threat is a grass-roots, bottom-up, localised one, but there will always be some need for top-down, centralised efforts. Financial and human resources will be needed to ensure that the general public and the journalists, along with other important groups, can count on getting reliable, up-to-date information of good quality on the outbreak.

Finally, this Commission Staff Working Document takes a first look at how, at EU level, and in close conjunction with all national communicators, we can provide Europeans with information that is transparent, coherent and consistent. The European Commission will continue to work closely with the Member States to ensure that this happens.

³ MediSys: weblink.