

ABSTRACT

Which communication strategies for the next influenza pandemic?

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The A/H1N1 2009 pandemic influenza confirmed that Risk Communication strategies are essential when the health of a population is threatened by a public health emergency. We describe the actions taken by the Marche Region in response to pandemic influenza in the field of public communication and the critical issues that have emerged from *post hoc* analysis of communication aspects.

Since 2006, the Marche Region has followed the pandemic preparedness and response strategies defined by the National Pandemic Plan [1]. In 2007-2008, the planning process was implemented at regional and local level and specific communication actions were planned at both levels. In 2008, 16 local focal points were identified for communication with the media and the public. An integrated committee (comprising the Marche Region, the Marche Regional Health Authority (ASUR) and the Regional Department of Civil Protection) was set up to manage the scientific aspects of communication and the interface with the mass media. In July 2009, a logo and slogan for a regional "Through prevention we fight on an equal footing" campaign were developed. In September 2009, a regional communication plan was approved [2]. An integrated management procedure for critical events such as first recorded case and first death from influenza was agreed. Two websites were activated [3], one dedicated to health workers and the other to the population, and since November a dedicated call centre has been operational. Since December, television commercials and in-depth programmes have been transmitted on local stations, while weekly newspaper coverage has been ensured by periodic press releases. Since March 2010, the response to the influenza pandemic has

been assessed, producing useful indications for communication activities.

Regional communication activities were designed to describe the pandemic as an extraordinary but expected event and to clarify the "aggressive" attitude regarding the containment of viral spread. However, in the face of global emergencies, communication at regional or local level has little impact on the population compared with communication activities at national level. We have identified some critical issues that need to be addressed:

- the absence of communication experts;
- the failure to provide training which, in the future, could make the communication activities of focal points more effective;
- the absence of concerted management of communication activities between national and regional levels;
- the absence of a strategy for assessing the risk perception of the population;
- the difficulty in differentiating communication activities for different target groups;
- the complete lack of use of advanced communication tools, such as social networks or video channels for publishing information material or institutional blogs for closing the gap between institutions and people by demonstrating openness and readiness for dialogue.

Investing today in communication for better management of a future public health emergency is necessary and cannot be postponed. National coordination of such activity is desirable.

References

- [1] National Centre for the Prevention and Control of Disease (CCM). *National Plan for Preparedness and Response to an Influenza Pandemic*. February, 2006.
- [2] Regional Pandemic Committee (RPC). *Regional Communication Plan (Operational guidelines no. 7 by the RCP)*. Available at: http://www.marcheinsalute.it/viewdoc.asp?CO_ID=12579 (last accessed: June 2011).
- [3] Region Marche website. For Public: <http://www.salute.marche.it/Default.aspx?alias=www.salute.marche.it/pandemia> (last accessed: June 2011); For Health Workers: http://www.marcheinsalute.it/viewdoc.asp?CO_ID=11636 (last accessed: June 2011).