



seasonal

# Influenza

Communication

toolkit guidelines





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## 1. Target audience

These guidelines present the ECDC influenza communication toolkit, designed to help European health authorities and organisations devise communication activities to tackle seasonal influenza. If you are involved in influenza communication programmes or are planning to organise communication activities on influenza prevention, these guidelines can be a helpful resource.

The guidelines aim to provide support for:

- Health communication experts
- Influenza programme managers
- Healthcare professionals in charge of communication activities on influenza prevention.

## 2. How this toolkit can help you

The toolkit has been developed as a handbook for national initiatives, with a view to either complementing existing national communication initiatives or providing a basis for the launch of new activities. It contains draft communications materials which can be adapted to national needs as well as advice on how best to approach different audiences and adapt the toolkit materials for use in national communication activities.

It builds on examples of communication activities currently underway in certain European countries and an evaluation of the existing materials produced by ECDC, UNICEF and WHO.

The materials provide a medium for communicating on seasonal influenza. The tools are designed to ensure that consistent and clear messages<sup>1</sup> are transmitted to targeted audiences effectively. The toolkit provides practical advice and template materials that can be used according to the specific aims of health communication activities. All template materials have been drafted in a format designed to ease duplication and dissemination, taking into account adaptability and respect for cost considerations.

<sup>1</sup> Information contained in the template materials may need to be updated in the future as new evidence becomes available.



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## 2.1 What's in the toolkit

This toolkit contains draft materials to provide key audiences with information on seasonal influenza and encourage vaccination and the adoption of good hygiene practices.

The toolkit guidance also includes suggested tactics for getting the message across to different audiences. Moreover, a symbol has been created ('Against the flu') which can be used in conjunction with national initiatives at various events.

### Types of materials

Prototype materials contained in this toolkit provide a hierarchy of information ranging from the concise messages in the flyers and posters and the simple information set out in the factsheets to more complete data and explanations in the leaflets. These multiple tools are designed to:

- Ensure that the priority audience have access to all necessary information
- Repeat key messages to ensure that they are registered.

Targeted materials have been developed for the following priority audiences:

- Healthcare professionals
- High-risk groups (elderly people, often defined as aged 65 and over, and those suffering from chronic diseases).

The materials are:

- Symbol/pins
- Posters
- Leaflets
- Factsheets
- Web banners and buttons.



### Symbol/pins

A symbol depicting a stylised influenza virus on a red target has been developed as a visual link for all the materials in the toolkit. The symbol can be used for the production of pins. The toolkit includes the files needed for the production of 25 x 25 mm format pins. The text on the pin 'Against the flu' can be translated into local languages.

### Posters

The poster presents basic facts on influenza and key preventive messages which can be read and understood quickly. More detailed content can be made available to target audiences via factsheets and brochures but can also appear on websites and in other materials.

### Factsheets

The two-page factsheets (130 x 250 mm) provide key information presented very synthetically. Although they contain more text than the poster, the information is nevertheless easy to understand and is useful for addressing an audience (e.g. where people are seated or waiting).

The factsheet for healthcare professionals is similar in structure but it is more technical than the one addressing risk groups.

### Leaflets

The four-page draft leaflets (180 x 297mm each page) provide detailed information on influenza, vaccination and – in the case of risk groups – on preventive hygiene messages. The leaflets are intended for audiences, where an interested individual has time to read through the material. They may require some professional adaptation.

### Web banners

Banners can be included in web page structures for the entire influenza season or as part of a post or feature article.



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## 2.2 How to use the toolkit

The toolkit includes templates of all available materials. The templates are available as Adobe InDesign files that can be modified using InDesign version 5.5. The individual graphics and fonts are also attached separately for easy application.

### Graphics

The graphics used for the toolkit are all in a resolution of 300 dpi and in a CMYK colour range. The files are provided in InDesign extension format.

The colours of the graphic boxes are:

- Cyan blue: C100 M13 Yo Ko
- Green: C57 Mo Y100 Ko

### Fonts

The fonts used are Franklin Gothic and Meta Pro. These are fonts that can be adapted to suit various alphabets and specific characters. These fonts are normally included in most word processing systems but if not, they are also contained in a folder in the toolkit.

Fonts are used as follows:

- Title: Franklin Gothic Medium Cond
- Subtitle in boxes: MetaPro Bold
- Body Text: MetaPro.

The colours of the fonts are:

- Cyan blue: C100 M13 Yo Ko
- Green: C75 M5 Y100 Ko
- White: Co Mo Yo Ko

These materials can be adapted according to language, cultural differences and campaign focus.

## 2.3 Using the tools effectively

Whether you decide to adapt/use some or all of the draft materials included in this toolkit, the materials will be most effective if they are part of a broader disease prevention and health communication strategy. For example, a simple distribution of the influenza leaflet will not be nearly as effective as the distribution of the leaflet just before the beginning of the influenza season, in line with other ongoing influenza awareness activities, and perhaps as a follow up to recent media coverage on the issue of increasing numbers of influenza cases.

When devising such a strategy, some of the key considerations include the following:

- Timing (e.g. awareness days and news stories)
- Price (both your budget and costs)
- Products (types of materials used in your campaign, which can also include give-away items, such as free packets of tissues, or services such as health checks)
- Distribution (how and where you will circulate your messages/materials)
- Additional channels (incorporating advertising, public relations, promotions and media advocacy)
- Potential allies/partnerships (such as NGOs, medical associations and patient groups).

## 3. Targeted information material

An important element of any health communication strategy is to identify and know priority audiences and to adapt the information and its presentation to their needs and level of knowledge on the specific topic, as well as their attitudes and perceptions.

The materials included in this toolkit are designed to direct key messages on seasonal influenza and its prevention at two specific, pre-identified audiences for whom information on influenza and preventive measures can be particularly relevant:

- Healthcare professionals (HCPs)
- High-risk groups such as elderly people (often defined as 65 years and over) and those suffering from chronic diseases.

In recognition of the varying level of prior knowledge and opportunities for responding to the threat of seasonal influenza among these groups, the materials have been adapted, while preserving consistency in the messaging.

Specific materials have been pre-tested in focus group studies<sup>2</sup> and then revised by communication experts, taking into consideration the inputs of the focus group and the most recent evidence-based studies on communicating health issues. These materials are intended to deliver clear and simple messages in a visually interesting way in order to capture the audience's attention.

<sup>2</sup> Focus group research is based on facilitating an organised discussion with a group of individuals representing a specific population group, in order to explore views and experiences on a specific topic.

### 3.1 Key messages and audiences

The key influenza prevention messages in this toolkit were selected due to their effectiveness in fighting the spread of influenza. Influenza prevention messages must be simple, easy-to-understand and implement, and as consistent as possible, with appropriate adaptations in tone and delivery to suit target groups.

When addressing healthcare professionals the core messages are:

- Protect your patients! Protect yourself!
- Influenza viruses are easily transmitted. Anyone can catch influenza and pass it to others without knowing it. Influenza comes every season.
- Be prepared. Get vaccinated.

In the case of healthcare professionals the core messages focus on vaccination as a way to protect not only themselves and their colleagues but, more particularly, their patients who are those most vulnerable to influenza.

Other key messages, proposed in the brochure and leaflet, address some fears and doubts which have been identified as potential barriers to vaccination.

Message	Potential barrier
Seasonal influenza vaccines are safe.	The message addresses potential lack of confidence in the safety of the vaccine transparently. In the leaflet a table comparing the risks associated with influenza infection and those associated with influenza vaccination highlights the benefits of vaccination while presenting the most common adverse effects.
Quotations from relevant scientific publications.	Three short quotations from scientific articles on the vaccination of healthcare professionals address the need for evidence-based information on the benefits of influenza vaccines.
Messages such as: <ul style="list-style-type: none"> <li>• Unimmunised healthcare workers put patients at risk</li> <li>• Vaccination should not be a personal preference but your commitment to the safety of your patients.</li> </ul>	These messages increase risk perception by inviting HCPs to take responsibility for the risk of transmitting the virus to their patients.
Messages such as: <ul style="list-style-type: none"> <li>• Influenza comes every year</li> <li>• If you get infected, you can spread it to others even if you do not display any symptoms.</li> </ul>	By highlighting how relevant it is to get vaccinated every year, these messages address the barriers of perceiving influenza vaccination as unimportant (e.g. 'I forgot to get vaccinated', or 'I did not have time to get vaccinated').
Information on influenza outbreaks and epidemics (factsheet).	This clarifies possible misunderstandings of the difference between influenza epidemics and pandemic influenza.



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In the posters the core messages addressing risk groups focus on vaccination. However in the leaflet and factsheets the focus is broader and includes hygiene preventive measures.

- Are you sure you are using the appropriate measures to protect yourself against the flu? Get vaccinated!
- Are you 65 or over?
- Do you suffer from chronic health problems? If yes, then you are at higher risk of flu-related complications and it is important that you follow your doctor's advice to avoid catching the flu.
- How to keep yourself and others healthy this winter: Get vaccinated before the flu season starts.

Getting vaccinated against flu every autumn is the most effective way to prevent catching the flu in winter. It reduces the risk of getting the flu, and if you still catch it you are likely to get a milder infection than if you had not been immunised. It is especially important that people in risk groups get vaccinated because they are at higher risk of developing serious flu-related complications.

Other preventive measures to limit the spread of flu:

- Wash your hands regularly with soap and water
- Cover your mouth and nose with a tissue when you sneeze.

Droplets travel only a short distance so those most at risk of becoming infected are those within a metre of an infected person who coughs or sneezes without covering their mouth and nose.

- Put your used tissues in the bin.

Do not reuse handkerchiefs or tissues. The flu virus can temporarily survive outside the body, so you can become infected by touching used handkerchiefs and tissues.

- If you do not have a tissue available, sneeze into your arm, covering totally your nose and mouth.
- Stay at home when you are ill
- If you get worse, seek medical help.

Other key messages addressing potential barriers to vaccination for people in risk groups are:

Message	Potential barrier
Influenza is a serious disease	This message addresses incorrect risk perceptions such as: <ul style="list-style-type: none"> <li>• Not being at risk of contracting influenza</li> <li>• Not perceiving the influenza virus as a serious threat to health.</li> </ul>
Influenza comes every year and infects 5–15% of the population.	By highlighting how relevant it is to get vaccinated every year, this message addresses some of the excuses for not getting vaccinated (e.g. 'I forgot to get vaccinated' or 'I did not have time to get vaccinated').
Exhaustive list of people in risk groups and list of symptoms.	This clarifies who is most at risk of flu-related complications and identifies the most common symptoms, making it easier to understand if you are infected.

If Member States have national influenza strategies in place such as mask wearing, room ventilation, they may wish to include these messages in the materials.

For further information on adapting or adding new messages to the prototype materials included in this toolkit, see section 3.4 'Adapting the material for local use'.





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## 3.2 Materials targeting healthcare professionals

The aim of communications targeting healthcare practitioners is to encourage healthcare professionals to get immunised against seasonal influenza every year. Based on a systematic literature review on effective immunisation campaigns<sup>3</sup> and the latest social marketing theories, instead of highlighting the benefits of vaccination it was decided to focus on risk-taking behaviour, acknowledging existing fears and sharing information on the risks associated with vaccination.

Materials developed include:

### Posters

The prototype sheets which can be used as posters provide key information on HCP immunisation and slogans explaining its importance. They are intended for display in HCP working areas such as:

- Hospitals
- Healthcare facilities
- Professional journals, health-related magazines and newspapers.

### Factsheet

This provides key information on seasonal influenza. In terms of dissemination, it is advisable to explore channels and venues that offer a natural link to the healthcare professional community such as:

- Direct mailing to hospitals/practicing doctors
- Professional websites and journals (online and print versions)
- Healthcare symposiums/events.

### Leaflet

The four-page leaflet provides information on the seriousness of the disease, its symptoms and the reasons why it is important for HCPs to be immunised. It can be distributed at the following venues:

- Hospitals
- Healthcare facilities
- General practitioners' offices.

### Web banners

Web banners can help promote influenza awareness among HCPs by directing readers to valuable information. They can be published on the websites of national bodies such as:

- Ministries of Health
- National health boards and institutes
- Healthcare-related professional associations
- All other bodies sought for advice by healthcare professionals.

### Pins

The symbol developed for the ECDC influenza toolkit can be also used for other initiatives. For example, an HCP can wear a pin as a testimonial of commitment, expressing their support to vaccination and encouraging other HCPs and patients to immunise themselves against flu. The pins can be distributed to hospital and healthcare personnel.

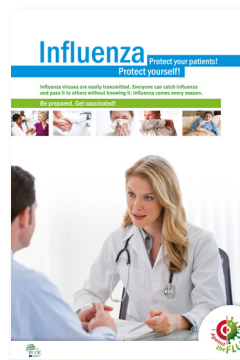
<sup>3</sup> Systematic literature review of the evidence for effective national immunisation schedule promotional communications commissioned by ECDC.



Leaflet



Factsheet



Poster



Pin



Web banner (several versions)





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## 3.3 Material targeting risk groups

The aim of health communication targeting risk groups is to create a significant level of awareness and understanding of the risks associated with seasonal influenza and the importance of taking the right preventive measures, in particular vaccination. The materials for these audiences include:

### Posters

The prototype sheets which can be used as posters provide key information on the importance of influenza vaccination. They are intended for display in venues that provide a link to the local community or where citizens may seek health advice such as:

- Healthcare facilities
- Doctors' waiting rooms
- Pharmacies, community centres, libraries, etc.
- Health journals, websites and newspapers.

### Factsheet

The two-page information sheet provides key information on seasonal influenza. It can be distributed at the following venues:

- General practitioners' offices
- Pharmacies
- Healthcare facilities
- Doctors' waiting rooms.

If deemed appropriate, it could also be sent by local health authorities as a direct mailshot to households with a letter explaining the risks associated with seasonal influenza.

### Leaflet

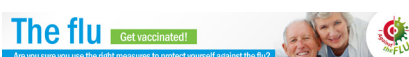
The four-page leaflet provides information on the seriousness of the disease, its symptoms and the reasons why it is important to get vaccinated. In terms of dissemination, it is advisable to explore channels and venues that provide a link to the local community or where citizens may seek health advice, such as:

- Health facilities
- Doctors' waiting rooms
- Pharmacies
- Community centres
- Health websites.

### Web banners

A web banner is a great way to promote influenza awareness while directing readers to targeted information. It can be published on the following websites:

- Patients associations
- National health bodies and institutes
- Online health-related journals and newspapers
- All other bodies visited by the general public and people suffering from chronic health conditions.



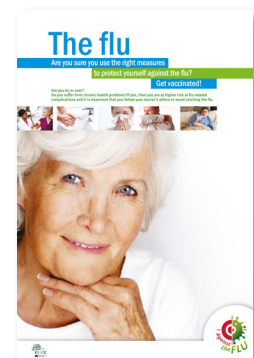
Web banner (several versions)



Leaflet



Factsheet



Poster



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## 3.4 Adapting the material for local use

To ensure maximum outreach and resonance, each Member State will have to adapt the template materials to their particular audiences. This may include:

- Translating materials into the official language(s)
- Evaluating materials currently in use in the Member State to discern the applicability/relevance of the toolkit materials, for example to avoid duplication
- Presenting/testing template materials with contacts in each Member State prior to wider dissemination to ensure that messages/visuals speak to the national audience.

## 3.5 Evaluating the impact of your health communication initiative

Formative research should be an integral part of the development or adaptation of programmes. Research should be carried out on an ongoing basis to help refine and improve programme activities. Identifying recognised results and milestones is of paramount importance to evaluating the success of a campaign. There are three main types of communication measurement:

- **Output:** the number of articles published or the requests for additional information received and/or content analysis
- **Outcome:** focused, business-oriented results that are a direct result of communication initiatives or campaigns
- **Impact:** the result of a communication initiative or campaign.

As the objective of the Influenza Communication Toolkit is to increase awareness of influenza prevention and stimulate attitudinal changes leading to behavioural modifications, the impact evaluation is the most appropriate approach for this kind of campaign. Behavioural changes are typically measured through population-based surveys, such as knowledge, attitudes and practice (KAP) studies which usually take the form of questionnaires. To complement this quantitative method of information collection, a qualitative method, such as interviews or creating focus groups, could also be introduced. The results allow evaluators to assess the effectiveness of existing behaviour change interventions and to adapt future communications. For example, the influenza symbol offers a simple way to test the impact of the campaign at a later stage to see whether healthcare professionals and/or people in risk groups recognise the image and the message.



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## 4. Choosing a local communications agency to develop national campaigns

To help with the adaptation and/or further development of the ECDC Influenza Communication Toolkit materials for national audiences, influenza programme managers may wish to consider appointing an external consultancy with experience

and expertise in health issues, consumer outreach and media relations.

ECDC may also be able to assist Member States in adapting the materials. Please contact ECDC directly to discuss this.

## 5. About ECDC

Set up in 2005 and based in Stockholm, Sweden, ECDC is a European Agency whose mandate is to strengthen Europe's defences against infectious diseases by identifying, assessing and communicating current and emerging threats to human health posed by infectious diseases and by promoting the exchange of best practices in disease prevention. Where threats are identified, ECDC supports the national and EU-level public health authorities responding to them. In order to do this, ECDC works in partnership with national health protection bodies across Europe to strengthen and develop continent-wide disease surveillance and early warning systems. By working with experts throughout Europe, ECDC is able to develop authoritative scientific opinions about the risks posed by current and emerging infectious diseases. This toolkit has been developed by ECDC to support the EU-wide response to the threat posed by seasonal influenza.

In the area of health communication, ECDC has three main activities:

- To efficiently communicate the scientific and technical output of ECDC to professional audiences.
- To communicate key public health messages and information to the media and the European public.
- To support the development of Member State communication capacities and activities.

The communication toolkits come within the remit of ECDC's Public Health Capacity and Communication Unit, which aims to support country health communication activities.

### Contact

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### Authors

These communication guidelines were developed under the supervision, technical guidance and expertise of ECDC's Public Health Capacity and Communication Unit and ECDC's Influenza Programme. For this purpose the consultancy Burson-Marsteller, Brussels was contracted in accordance with EU Agency rules on legal procurement to undertake the necessary operational work.

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