



share and move to face nasty bugs

TITLE: POLICY WATCH
SUBTITLE: PANDEMIC PREPAREDNESS AND RESPONSE
BULLETIN REPORT 1

ASSET Project • Grant Agreement N°612236

ASSET

Action plan on SiS related issues in Epidemics And Total Pandemics

7th RTD framework programme

Theme: [SiS.2013.1.2-1 Sis.2013.1.2-1]

Responsible partner: **ISS**

Contributing partners: **NCIPD, UMFCO, HU**

Nature: **Report**

Dissemination: **PU**

Contractual delivery date: **2015-06-30 (m18)**

Submission Date: **2015-06-12 (m18)**

This project has received funding from the European Union's Seventh Framework Programme for research, technological development and demonstration under grant agreement no 612236



co-funded by the EU. GA: 612236

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DOCUMENT MANAGEMENT

PROJECT FULL TITLE	Action plan on SiS related issues in Epidemics And Total Pandemics
PROJECT ACRONYM	ASSET
	Coordination and Support Action: project funded under Theme SiS.2013.1.2 "Mobilisation and Mutual Learning (MML) Action Plans"
GRANT AGREEMENT	612236
STARTING DATE	01/01/2014
DURATION	48 months

D6.4 Pandemic Preparedness and Response Bulletin Report 1: Activity Report till to m18

Task: 6.2

Leader: ISS – Other contributors: NCIPD, UMFCO, HU

History of changes:

Vn	Status	Date	Organisation / Person responsible	Reason for Change
V1	Draft	13/05/2015	ISS/Valentina Possenti	Better refining architecture of the Report
Vf	Final	12/06/2015	ISS/Valentina Possenti	



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EXECUTIVE SUMMARY

The current report has been divided in three main parts which represent the features characterizing the task of delivering the **ASSET Pandemic Preparedness and Response Bulletin**. This schedule essentially mirrors how the Quality Assessment Questionnaire has been completed and submitted to the ASSET Internal Quality Officer¹. This last and other relevant documents as well as a copy of the **first Bulletin Issue** are included into technical Annexes.

General issues

In the first chapter, basic items of the ASSET Pandemic Preparedness and Response Bulletin are presented: purpose, objectives, target and timing. Then, the distinction between core and variable elements is addressed and is better exploited within part I and part II.

Core elements

As it is explicitly written in the Description of Work (DoW), the first action regarding the task 6.2 has concerned the establishment of an Editorial Committee. Furthermore, issues which have been defined are: assigning rules and timing; recognizing a sustainable architecture (based on the so-called “*What’s new*” formula) and feasible dissemination modes of the Bulletin.

Variable elements

About practically processing the first Issue of the ASSET Pandemic Preparedness and Response Bulletin, a selection of contents was operated coherently with its referring time interval. The work proceeded with allocation of tasks and deadlines to be accomplished by members of the Editorial Committee. A constant exchange of ideas has been active both within the Editorial Committee and among all Consortium Partners by the Community of Practice (CoP) web platform. Then, we put in practice the two ways that have been identified to spread out the Bulletin within the international stakeholder community.

¹ A copy of the Quality Assessment Questionnaire (QAQ) concerning the current task 6.2 that the Pandemic Preparedness and Response Bulletin refers to is retrievable at Annex I.



ACKNOWLEDGEMENTS

We acknowledge the Editorial Committee members² and all ASSET consortium partners³ who have been useful in relevantly refining the First Issue of the Pandemic Preparedness and Response Bulletin as well as our colleagues from the Istituto Superiore di Sanità Resource Centre: Caterina Rizzo, Antonella Lattanzi, Lorenzo Fantozzi, Arianna Dittami and Valerio Occhiodoro for the valuable support provided, respectively, on editorial, linguistic, graphic, and technical issues.

CONTRIBUTORS OF AUTHORS

Concerning the First Issue of the Pandemic Preparedness and Response Bulletin that the current Deliverable Report (D6.4) refers to, contributors have been as it follows:

Valentina Possenti, Barbara De Mei, Alberto Perra, Eva C. Appelgren (Istituto Superiore di Sanità, Italy): conception and design, identification of eligibility criteria for contributions, data-checking, writing/editing, working board creation and coordination;

Manfred Green (University of Haifa, Israel): conception and design, identification of eligibility criteria for contributions, data-checking;

Mira Kojouharova, Anna Kurchatova, Savina Stoitsova (National Centre of Infectious and Parasitic Diseases, Bulgaria): conception and design, identification of eligibility criteria for contributions, data-checking, writing/editing;

Mircea Ioan Popa, Adriana Pistol (Universitatea De Medicina Si Farmacie 'Carol Davila' Din Bucuresti, Romania): conception and design, identification of eligibility criteria for contributions, data-checking, writing/editing.

.

² Names are listed at Table 1.

³ Partners are retrievable on the ASSET website at URL: <http://www.asset-scienceinsociety.eu/about/partners>



1. INTRODUCTION

The **2009 H1N1 influenza pandemic revealed a breakdown in the communication between decision makers, their scientific institutions and the European public.** This communication failure led to unwanted effects, such as the failure of a large part of the population to adopt adequate preventive measures, and the scientific sector not taking into account important information coming from the population.

ASSET (Action plan in Science in Society in Epidemics and Total pandemics) is a four-year, European Commission funded Mobilization and Mutual Learning Action Plan (MMLAP) project, which started on January 2014, 1st and will end on December 2017, 31st.

The general objective of ASSET is to create the blueprint for a better response to pandemics, through improved forms of dialogue and better cooperation between science and society at various stages of the research and innovation process. The perspectives developed by the ASSET project will flow into Horizon 2020.

The specific project objectives are:

- ✓ forge a partnership with complementary perspectives, knowledge and experiences to address scientific and societal challenges raised by pandemics and epidemics, and associated crisis management;
- ✓ explore and map Science in Society (SiS) related issues in pandemics and epidemics;
- ✓ define and test a participatory and inclusive strategy to get a successful two-way communication within crisis management;
- ✓ identify necessary resources to make sustainable the actions after the project completion.

Combining a wide-extended spectrum of disciplines, ranging from public health to social and communication sciences, ASSET aims at developing an integrated and transdisciplinary strategy, which will take place at different stages of the research cycle, implying local, regional and national levels.

One of the several project tasks, within the WorkPackage “Policy watch”, is about delivering a Pandemic Preparedness and Response Bulletin (T6.2).



1.1 PURPOSE

The **ASSET Pandemic Preparedness and Response Bulletin (PPRB)**, “*Share and move*”, enters a set of activities which ensure a reflection on EU strategic priorities about pandemics and a regular monitoring other EU related initiatives and policy developments at local, national and European levels, in order to better connect with policy cycles.

It is essential that ASSET head toward the new H2020 approach, even more in constant liaison with Research or Policy EC services involved in Challenges 1 principles (Health, demographic change and wellbeing) which indicates some priorities for coming years.

It is said that it is of paramount importance providing decision-makers with (effective) suggestions about how managing pandemic (or other priority) situations. As ASSET overall, its own PPRB would contribute identifying and promoting the “channels” and the “frame” for making easier and stable communication within different groups in the society and, by that, efficacy of the policy making.

1.2 SCOPE AND OBJECTIVES

The ASSET-PPRB is a tool that aims at collecting and disseminating information on any policy...

- ✓ initiatives devoted to pandemics and related crisis management,
- ✓ developments at local, national and European levels.

This Bulletin is focused on considering and revising specific issues related to EU strategic priorities in pandemic preparedness, including communication and other responses. More in detail, it deals with:

- ✓ general crisis management issues, such as Public Health Emergency Preparedness (PHEP),
- ✓ emergent and/or re-emergent non communicable diseases (e.g. Ebola),
- ✓ monitoring current status of established national pandemic plans and/or strategies in Europe, as well as statements, recommendations, etc. about public health emergencies.

1.3 TARGET AUDIENCE

Highlighting strategic priorities and policy-related initiatives on pandemic preparedness and response, the “*Share and Move*” ASSET Bulletin is supposed to be:

- ✓ mainly addressed to a wide-ranged target including competent institutional actors and public health authorities, decision-makers, even on social networks;
- ✓ circulated within the ASSET broader stakeholder community and sent to a mailing list of relevant public health authorities and policy making institutions;
- ✓ available on the ASSET website, so that brand identity would be greater enforced and project outputs are more recognizable by intended targets, being associated to the Consortium as a whole.



Specifically, linking up Bulletin and policy cycle in matter of pandemic preparedness and response requires a segmented targeting different groups: dedicated people who should find the Bulletin essential to act in favour of the project objectives, then informed subjects who could look at it as a useful tool, finally a larger population of those thinking that it is simply interesting.

Within the Bulletin editorial board, we have pinpointed the dedicated people (our primary target) who have a certain weight in the policy cycle, not necessarily only the decision makers as traditionally intended in the classic interpretation but also other stakeholders (e.g. acting on social network), following the mentioned ASSET philosophy. This approach seems to be strongly supported recently also in the core of the MMLAP projects where empowerment/enlightenment of policy level has to be driven by empowered/enlightened citizens.

1.4 TIMING

The ASSET project partners have been constantly kept informed since the Kick-off Meeting (KoM; May 2014, 26-27th) about the working process on the Bulletin by specific discussion contributions on the ASSET Community of Practice (CoP) web platform. The first issue of the biannual Bulletin has been published within the first half of 2015. Overall, seven issues of ASSET-PPRB are required to be published and to be grouped in three reports: the present Deliverable is the first one, the second by December 2016, the third by December 2017.

1.5 GENERAL CRITERIA AND PROCEDURES

In delivering the ASSET-PPRB, two different sorts of elements can be recognized, respectively, to be set only once and to be developed for each Bulletin Issue.

Core elements

- ✓ Establishing an Editorial Committee and sharing agreement with them on rules, overall timing, potential and eligible contents, structure and target of the Bulletin as well as dissemination modes.

Variable elements

- ✓ Allocating tasks and activities by deadlines among the members of Editorial Committee according to their own role (task contributors vs other elected members);
- ✓ keeping in continuous and constant contact with members of Editorial Committee both by the several tools provided on the CoP web platform (forums, reserved messages, shared files and documents, calendar) and by eventual meetings ad hoc (virtual and/or residential);
- ✓ gathering and formatting highlights or relevant information in matter of pandemic preparedness and response;
- ✓ developing a comprehensive and consistent layout, without a massive content editing;
- ✓ sending the Bulletin issue out to a mailing list of relevant targets and putting it available on the ASSET website.



PART I: CORE ELEMENTS

2.1 ESTABLISHMENT OF AN EDITORIAL COMMITTEE

The ASSET-PPRB Editorial Committee members (in number of 12; names and roles are listed in Table 1) have been identified because of their own position in the project.

Beside task leader (ISS) and official contributors (HU, UMFCO, NCIPD), other Partners are represented, too:

- ✓ TIEMS as leading the High Level Policy Forum (task 6.1),
- ✓ PROLEPSIS as scientific publication leader,
- ✓ ZADIG as in charge of coordinating communication and quality.

Table 1. Editorial Committee of the ASSET-PPRB⁴

Name/Surname	Role in ASSET	Partner	Country	Contact
Valentina Possenti	Task leader	ISS	Italy	valentina.possenti@iss.it
Barbara De Mei	Task leader	ISS	Italy	barbara.demei@iss.it
Alberto Perra	Task leader - Scientific Coordinator	ISS	Italy	alberto.perra@iss.it
Eva C. Appelgren	Task leader - Technician Coordinator	ISS	Italy	eva.appelgren@iss.it
Manfred Green	Task contributor	HU	Israel	manfred.s.green@gmail.com
Mircea Ioan Popa	Task contributor	UMFCO	Romania	mircea.ioan.popa@gmail.com
Adriana Pistol	Task contributor	UMFCO	Romania	adrianapistol@yahoo.com
Mira Kojouharova	Task contributor	NCIPD	Bulgaria	mkojouharova@ncipd.org
Thomas Robertson	High Level Policy Forum leader	TIEMS	Belgium/US	tvrobertson@yahoo.com
Agoritsa Baka	Scientific Publication leader	PROLEPSIS	Greece	baka@keelpno.gr
Eva Benelli	Communication leader	ZADIG	Italy	benelli@zadig.it
Donato Greco	Quality manager	ZADIG	Italy	grecondon@gmail.com

The main activities of the ASSET-PPRB Editorial Committee will be:

- ✓ to gather, filter and edit relevant information,

⁴ Names of partner leading the task 6.2 are in bold.



- ✓ to keep abreast the Consortium of the main policy developments in order to facilitate the project alignment with policy cycles.

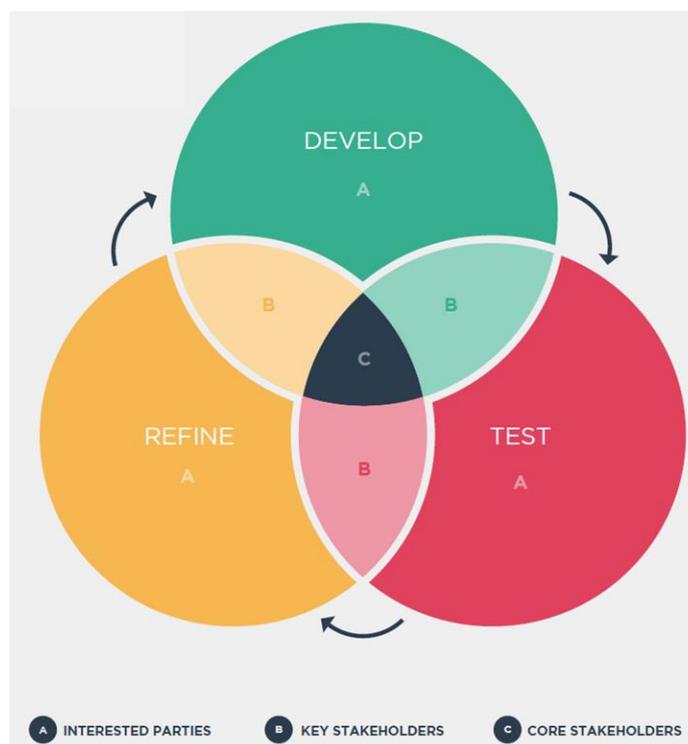
2.2 PRODUCTION MODEL

As stated above, the ASSET-PPRB is included in the “Policy Watch” WorkPackage, but is indeed a communication product. Effective and strategic communication has to be planned and programmed: this means getting a targeted, goal-driven message out at the opportune time through the appropriate channel. “Develop a plan and a strategy” is therefore the first step in the communication process⁵. As it is represented at Figure 1, three main steps can be recognized in performing a communication activity:

- ✓ delivering a plan and a strategy,
- ✓ developing and pre-testing messages and tools,
- ✓ evaluating and fine tuning.

Moreover, about subjects playing an active role within the process of a communication project three different types can be recognized: interested parties, key- and core stakeholders.

Figure 1. Stages of Process in the Communication Lifecycle



2.2.1 SET UP OF THE BULLETIN FORMAT

The basic rule for selecting eligible contents is both relevance- and recency-based. It has been decided to adopt a Bulletin format that implements a “What’s new...” formula:

⁵ National Research Council. Improving risk communication. Washington, DC: National Academy Press; 1989.



What's new from the world of Pandemic Preparedness and Response

The main section can be seen as a very general “tank” containing several kinds of contributions (research articles, reports, news, etc.) about all ASSET SiS related issues such as PHEP, risk communication, laws. Possible examples in this “core” folder are: Ebola Virus Disease (EVD) in West Africa, risk communication, evaluation of pandemic plans.

What's new from the world of Public Health Institutions

This column is thought as a fix box to be fulfilled in with major achievements by the most important international public health institutions, i.e. WHO, WHO/EU, ECDC, and others, about the topics of interest.

What's new from the world of Social Networks

A space that is reserved to exploit highlights, inputs and insights about pandemic preparedness and response circulated by the most used social media.

What's new from the world wide Web in Pandemic Preparedness and Response

One relevant website in the field is put in evidence in each Bulletin Issue.

What's new from the world of ASSET

An update on significant ASSET achievements and outcomes (WPs, Deliverables, Events).

What's new with a SnapShot

An additional item standing for an innovative concept in matter of pandemic preparedness and response represented by a “graphic element” with a verbal exploitation provided besides.

2.3 DISSEMINATION MODEL

Even if the ASSET Pandemic Preparedness and Response Bulletin is not explicitly included within the Communication WorkPackage (#7), it is essentially characterized as a communicative tool (and actually recognized in the Communication Strategy; Deliverable 7.1).

It follows that to reach a full achievement of this task's objectives, the key-components are two: the production phase and the dissemination stage.

About circulating the Bulletin among relevant stakeholder community internationally, double spreading mode has been identified.

On one hand, according to a so-called passive approach, issuer sends the Bulletin to an identified mailing list of relevant targets and on the other hand a proactive way is also foreseen because any user of the ASSET website can read and download the Bulletin on the project portal as well as other functionalities are provided such as commenting articles, making content and/or layout proposals, subscribing for automatic reception of following issues.

About dissemination, actions of networking to further increase the Bulletin spread are developed as well as monitoring trend indicators (required within Evaluation WorkPackage, #8, at task 8.2).



PART II: VARIABLE ELEMENTS

3.1 PRODUCTION OF THE FIRST PPRB ISSUE

The effective editing of the first ASSET Pandemic Preparedness and Response Bulletin, “*Share and move*”, has been developed according to what has been described in the paragraphs of the previous chapter (#2).

3.1.1 METHODS AND MATERIALS

It could be stated that the first PPRB Issue witnesses a proper “mutual learning” effort both in procedures undertaken and with regard to contents included.

The PPRB has been in fact constantly submitted to a transparent exchange within the Editorial Committee and, in general, among all ASSET Consortium Partners as well.

The whole editing process can be described according to milestones which are synthetically depicted in Table 2 and reported more in detail in Annexes there indicated.

Table 2. Milestones in the ASSET-PPRB editing process

HOW	WHERE	WHEN	ANNEX (number, type)
✓ general presentation of task 6.2 at Kick-off Meeting (KoM)	Rome	26-27 May 2014	II.a Slides
✓ dedicated discussion thread on the Community of Practice (CoP) web platform	WP6 Forum	30 June 2014	II.b Posts’ list
✓ identification of main thematic sections to be developed within each issue	WP6 Forum	4 December 2014	II.c Cover page
✓ consultation of the Editorial Committee members by call conference	Skype	2 February 2015	II.d Minute Report
✓ presentation of an advanced version of the I issue at Transdisciplinary Workshop (TDW)	Geneva	24-25 February 2015	II.e Slides
✓ restrict editorial meeting	ISS	31 March 2015	II.f Prefinal Version

Firstly, the PPRB was reviewed internally by Consortium Partners and then validated by a panel of external stakeholders, including healthcare professionals, public health officials and crisis communication experts.



The draft version of the first issue of the Bulletin was released by the task leader (ISS) to the Communication WP leader (ZADIG) and following recommendations for amendments, it was submitted to the Consortium for further comments and approval.

This last step produced significant transformations in the first Issue Bulletin layout introducing: a cover page with a “real” title; an index – table of contents; a longer editorial also including information about ASSET and in particular on the Bulletin itself; articles’ text on two columns; text boxes intended as apart from article text; first lines or headings in the texts in bold; disclaimer and editorial committee members’ names. It was decided to eliminate links to pdf to be uploaded on the website (otherwise html pages should have been generated); on the contrary, links to existing websites remain available.

3.1.2 A GLIMPSE OF THE RESULTS

The contents of the first Bulletin Issue⁶ have been based on the schedule described above and are reported in the subsection that follows. In the first Bulletin Issue, the six sections which are presented at paragraph 2.3 have been fulfilled in as here reported.

What’s new from the world of Pandemic Preparedness and Response

- ✓ EU Decision 1082: a challenge to increase population protection!
- ✓ Dangerous relationships
- ✓ Assessment of human influenza pandemic scenarios in Europe
- ✓ About latest Preparedness and Response to Communicable Diseases in the world.

What’s new from the world of Public Health Institutions

- ✓ Ebola outbreak one year later: the WHO evaluation
- ✓ Pandemic Preparedness and Response according to ECDC.

What’s new from the world of Social Networks

This article updates about main ideas and insights circulated by the most used social media.

What’s new from the world wide Web in Pandemic Preparedness and Response

In light of the legacy with the EU-funded TELL ME project, its website has been put in evidence.

What’s new from the world of ASSET

In the Issue n.1, the breaking news from the first year of ASSET activity at a glance deal with: finalized WP2, task 6.1 (High Level Policy Forum), Glossary of terms (Deliverable 1.2).

What’s new with a SnapShot

In this case, the graphic hook sided by a verbal explanation is the figure representing the Outbreak Communication Framework Model elaborated in TELL ME.

⁶ Annex III shows the ten-page first Issue of the ASSET-PPRB



3.1.3 DISCUSSION

The amount of activity encompassed by the First Issue of the Pandemic Preparedness and Response Bulletin, “*Share and move*”, denotes all essential ASSET elements: the rationale (need to re-establish trust between research/policy making and citizens), the strategy (improving efficiency and efficacy of communication between these two “worlds”, according to the scenario of the Science in Society and, to do that, the European approach of the Responsible Research and Innovation, RRI) and finally the outcome (getting the citizens not only beneficiaries of an improved communication, but also promoters within the policy cycle of a new deal in preparedness and response against epidemics and pandemics).

We think this Bulletin has to be seen as a pretty “experimental” object: it is not an official source and does not have a static and rigid architecture. Thus, given the general frame identified, its seven issues could differ both according to what really occurs in matter of pandemic (and epidemic) preparedness and response and basically depending on the capacity of the Editorial Committee Members to retrieve information that are worth to be published.

Furthermore, it cannot be forgotten the Bulletin is generated within ASSET project so that beside institutional sources, it is necessary for readers having also a direct link and/or explanation on what is currently relevant to the end of preparedness and response.

This pathway is also supported by many useful aspects to be enlightened for preparing the following mobilization and mutual learning action plan.

LIMITATIONS

Suitable deviations cannot be actually reported, but also T6.2 conveys the general delay that ASSET had since its start-up.

Apart from this quite general aspect, the main difficulty in particular affecting the work on the first ASSET-PPRB Issue has been represented by uncertainty about roles, responsibilities and specific Bulletin items to be developed.

3.1.4 CONCLUSIONS AND RECOMMENDATIONS

Given the participatory methods and approach which have already been implemented (widely described in the present Report), the first ASSET-PPRB Issue has played the crucial function of test phase to address the way to further elaborate and improve this task.

Even if the activities started on time as expected (at sixth project month, June 2014), mainly core elements (depicted at part I: establishing Editorial Committee, decision making process about production and dissemination models) impacted on the first Issue release.

Basing on this experience, since core elements have to be set only once, we are confident that following ASSET-PPRBs will be issued biannually.



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3.2 DISSEMINATION OF THE FIRST PPRB ISSUE

As indicated at paragraph 2.3, a double spreading mode has been identified.

The First Bulletin Issue has been circulated both according to transmission to a mailing list of relevant targets and being made available on the ASSET website.

3.2.1 MAILING LIST OF RELEVANT STAKEHOLDERS

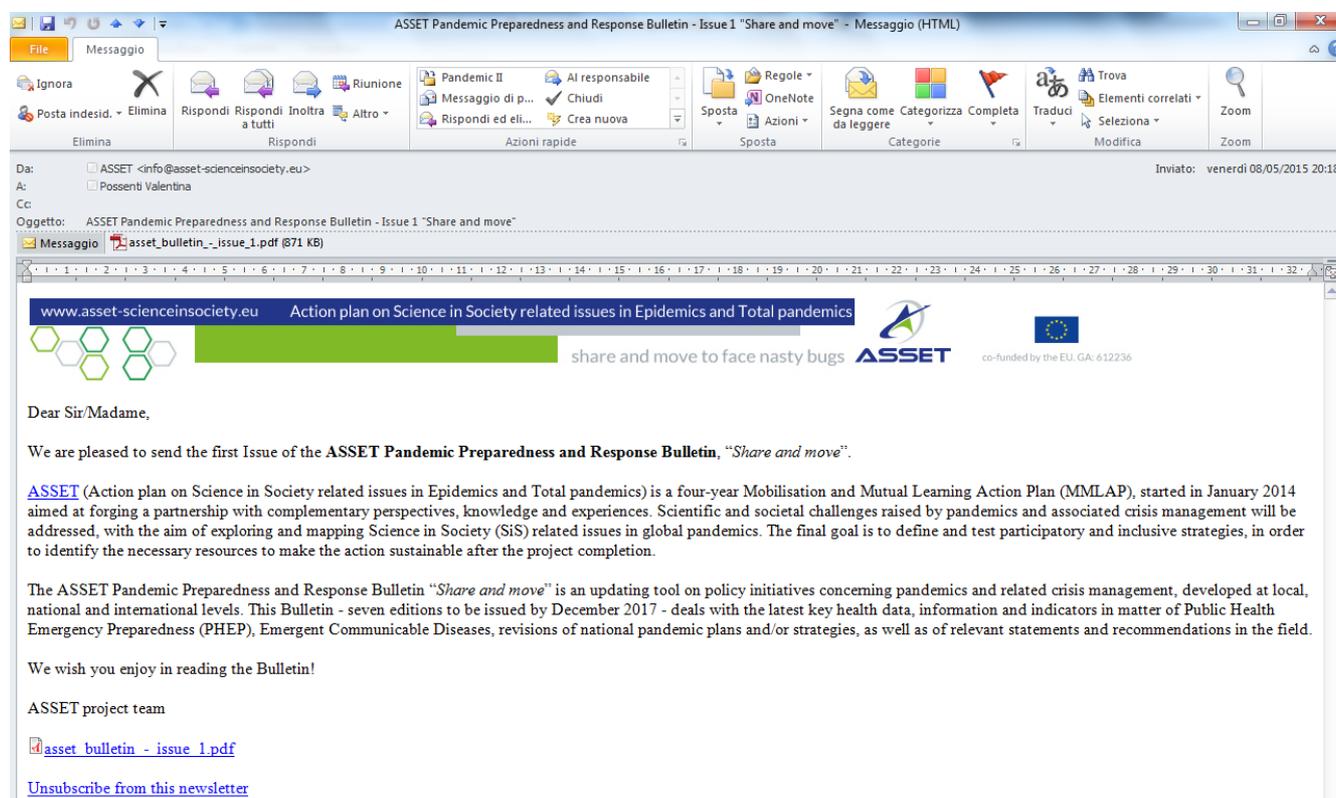
ZADIG has been provided by ISS with a cover letter for sending the Bulletin out and takes care of sending the Bulletin out to identified targets (Figure 2).

To create a mailing list of addressees/targets, firstly ISS extrapolated a Stakeholders Inventory base from TELL ME project.

Partners who have added up other contacts are: NCIPI, IPRI, PROLEPSIS.

Moreover, in addition to the official PPRB mailing list, TIEMS has agreed to forward the ASSET Bulletin to their own newsletter's addressees.

Figure 2. The cover email with which the PPRB is sent out



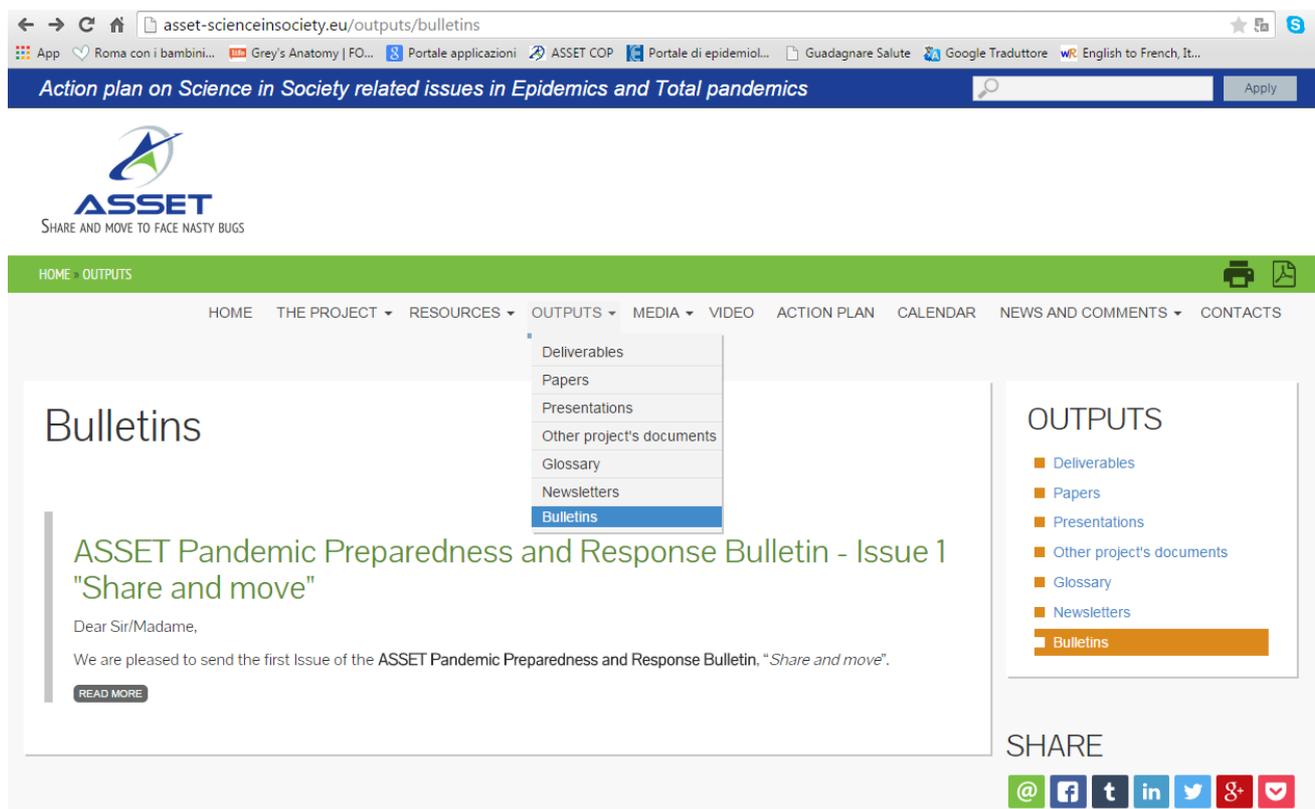
To further improve the firstly assembled mailing list, efforts in networking are developed and supported as well. It is expected that the amount of receivers will be pretty increased.



3.2.2 SUBSCRIBING ON THE ASSET WEBSITE

As specified in the project DoW (T7.3, point 15; page 30 of 48), among tools available on the ASSET website also the electronic policy bulletin is included (Figure 3).

Figure 3. The ASSET webpage where the PPRB is placed



It is possible to subscribe directly on the ASSET website so that each issued Bulletin will be automatically received by registered users in their own personal mailbox.

This specific dissemination mode is very sensitive to the website visibility: an increasing number of subscribers might be expected as the total of visits improves.

3.3 MONITORING THE CIRCULATION OF THE PPRB

Monitoring the PPRB spread is explicitly foreseen within the project activities.

Then, to really estimate the diffusion of the ASSET Bulletin, *Share and move*, we have designed to report how many stakeholders are reached both if they receive it because included in the PPRB mailing list or whether they actively subscribe on the website.

The synthetic Indicator that has been identified for this task within the proposed logframe is: *“Annual increase by 15% in the list of stakeholders receiving the Pandemic Preparedness and Response Bulletin”*.



WEB REFERENCES/RESOURCES

Australian Response MAE Network (ARM) <http://www.arm.org.au/>

Information Centre on Emerging Infectious Diseases in the ASEAN Plus Three Countries

<http://www.aseanplus3-eid.info/>

Center for Disease Control and Prevention (CDC) <http://www.cdc.gov/mmwr/international/world.html>

European Center for Disease Control and Prevention (ECDC)

http://www.ecdc.europa.eu/en/healthtopics/seasonal_influenza/epidemiological_data/Pages/Weekly_Influenza_Surveillance_Overview.aspx

<http://www.ecdc.europa.eu/en/press/news/Pages/News.aspx>

Eurosurveillance <http://www.eurosurveillance.org/public/links/Links.aspx>

Epinorth <http://www.epinorth.org>

Georgia Institute of Technology (GATECH) www.emergencypreparedness.gatech.edu

Health Authority - Abu Dhabi (HAAD) <https://www.haad.ae/haad/tabid/1177/Default.aspx>

Hellenic Center for Disease Control and Prevention (HCDCP)

<http://www2.keelpno.gr/blog/?p=2778&lang=en>

Maryland State

<http://preparedness.dhmh.maryland.gov/SitePages/Public%20Health%20And%20Emergency%20Preparedness%20Bulletins.aspx>

The New England Journal of Medicine (NEJM)

<http://www.nejm.org/doi/full/10.1056/NEJMra1208802#t=references>

National Center for Disaster Preparedness – Columbia University (NCDP) <http://ncdp.columbia.edu/>

Drexel University (Philadelphia)

<http://www.drexel.edu/publicsafety/emergencypreparedness/program/bulletin/>

Vermont State http://healthvermont.gov/pubs/disease_control/2005/2005-06.aspx

World Health Organisation (WHO)

<http://www.who.int/bulletin/volumes/92/12/en/>

<http://ojs.wpro.who.int/ojs/index.php/wpsar/article/view/266/395>

<http://www.afro.who.int/en/mozambique/country-programmes/disease-prevention-and-control/communicable-diseases.html>



ANNEX I - Quality Assurance Plan for task 6.2

WP 6	Beneficiary Leader Number 8
Task 6.2 Pandemic Preparedness & Response Bulletin (ASSET-PPRB)	Beneficiary Leader Number 8
Contributors: NCIPD, UMFCD, HU	
<p>Task description as from the DOW We are going to issue a six month electronic bulletin which will collect and disseminate information on policy initiatives devoted to pandemics and related crisis management, and policy developments at local, national and European levels. After the project start, the leading partner will establish the editorial committee of the bulletin which will be tasked to gather, filter and edit relevant information. The first issue of the bulletin will be published at m12. The bulletin will be circulated within the ASSET wider stakeholder community and sent to relevant public health authorities and policy making institutions. The bulletin editorial committee will be also in charge to keep abreast the consortium of the main policy developments in order to facilitate the project alignment with policy cycles. Notably the Bulletin will monitor current status of EU national pandemic plans and eventual modifications, such as: 1) If the previous plans towards milder pandemic scenarios were re-oriented; 2) If additional interventions verified during the last pandemic were introduced; 3) If the structure of the crisis management team and the method of vaccine acquisition have been modified</p>	
<p>Strategies The responsibility of the ASSET Pandemic Preparedness & Response Bulletin (ASSET-PPRB) is given to the Bulletin Editorial Committee: Alberto Perra, Barbara De Mei, Valentina Possenti, Eva C. Appelgren [ISS, Task leader]; Manfred Green (HU), Mircea Ioan Popa, Adriana Pistol (UMFCD), Mira Kojouharova (NCIPD) [Task contributors]; Thomas Robertson [TIEMS, T6.1 leader]; Agoritsa Baka [PROLEPSIS, Scientific Publication leader]; Eva Benelli, Donato Greco [ZADIG, Communication leader]. The main activities of ASSET-PPRB Editorial Committee are to gather, filter and edit relevant information; to keep abreast the Consortium of the main policy developments in order to facilitate the project alignment with policy cycles; The working method is thought according to a very collaborative approach within the Consortium as a whole; thus, beside the contribution of the Editorial Committee inputs by all partners are developed by the CoP web platform as well; The ASSET-PPRB is supposed to be circulated within the ASSET wider stakeholder community and sent out to relevant public health authorities and policy making institutions by the ASSET website, so that brand identity would be greater enforced and project outputs will be more recognizable by intended targets; Linking up Bulletin & Policy cycle in matter of PPR requires targeting different groups: dedicated people (such as decision-makers, competent public health authorities) who should find the Bulletin essential to orient their actions in pandemics; then, informed subjects who could look at it as a useful tool; finally, a larger population of those thinking that it is simply interesting. An aspect to pinpoint the dedicated people (our favorite target) who have a certain weight in the policy cycle, not necessarily only the decision makers as traditionally intended but also other stakeholders (e.g. social network inputs).</p>	
<p>Objectives The ASSET-PPRB is a tool that aims at collecting and disseminating information on policy: -initiatives devoted to pandemics and related crisis management, and -developments at local, national and European levels. This biannual Bulletin will consider and revise specific issues related to EU strategic priorities in pandemic preparedness, including communication and other responses. More in detail, it will deal with: general crisis management issues, such as Public Health Emergency Preparedness (PHEP), Emergent Infectious Diseases-EID (e.g. in the first issue a focus could be given on Ebola), monitoring current status of established national pandemic plans and/or strategies in Europe, as well as statements, recommendations, etc. about public health emergencies.</p>	
<p>Methods Core elements: Setting up rules and timing for the Editorial Committee; Sharing hypothetical/eligible contents, structure and target of the Bulletin with the Editorial Committee. Variable elements (for each issue of the Bulletin, biannually): Allocating tasks/activities by deadlines among the members of Editorial Committee according to their own role (task contributors vs other elected members); Keeping in continuous and constant contact with members of Editorial Committee both by the several tools provided on the CoP web platform (Forums, Reserved messages, shared files and documents, calendar) and by eventual and ad hoc on line meetings, etc.; Gathering/Collecting highlights and relevant information in matter of Pandemic Preparedness & Response; Developing a comprehensive and consistent layout/format, without any content editing/elaboration; Sending out Bulletin issue with a cover letter to a mailing list of relevant target</p>	
<p>Main activities: 1. The ASSET-PPRB processing/development Definition of the structure and target of the Bulletin with the Editorial Committee; Selection of identified topics, highlighting “<i>What’s new</i>” in several contexts concerning the referring timing of the Bulletin issue; Identification of rules and timing for the Editorial Committee; Allocation of tasks and deadlines to be accomplished to members of the Editorial Committee; Sharing ideas and keeping in contact constantly with members of the Editorial Committee by the CoP web platform and eventual on line meetings. 2. The ASSET-PPRB circulation/spreading Defining means and modes of spreading the Bulletin; Mailing list of addressees/targets; Writing</p>	



down the cover letter for sending out the Bulletin; Networking to increase the spreading of the Bulletin; Monitoring the spreading of the Bulletin.

Outputs The first issue of the biannual Bulletin will be published at the beginning of 2015. Overall, seven issues of ASSET-PPRB are required to be published and will be grouped in three Reports: the first will be edited by June 2015, the second by December 2016, the third by December 2017.

(Optionally) If you consider that could help, please, try to set up a Logical Framework Analysis following the table in the scheme below

	Definition	Indicator	Source of information	Risks and assumptions
Specific objective	Delivering 7 issues of PPRB	7 published Bulletins	Editorial Committee, Consortium	Delays in publishing Bulletin
Results 1	Bulletin Production	Tasks/Deadlines accomplished	Editorial Committee	Different editorial viewpoints within the Editorial Committee
Activities				
Results 2	Bulletin Dissemination	People reached by the Bulletin	Editorial Committee	Difficulties in achieving effective mailing list of relevant stakeholders in field of interest within different EU countries
Activities				

(You can add more lines for more results and, certainly, many more lines for different activities)

Finally, in any case, for the results and activities that you consider as qualifying your task you should define the quality requirements

Result 1. Producing the Bulletin

A1.1	Definition of the structure and target of the Bulletin with the Editorial Committee
A1.2	Selection of identified topics, highlighting "What's new" in several contexts with regard to the referring timing of PPRB
A1.3	Identification of rules and timing for the Editorial Committee
A1.4	Allocation of tasks and deadlines to be accomplished to members of the Editorial Committee
A1.5	Sharing ideas and keeping in contact constantly with members of the Editorial Committee by the CoP web platform and eventual on line meetings

Result 2. Disseminating the Bulletin

A2.1	Defining means and modes of spreading the Bulletin
A2.2	Mailing list of addressees/targets
A2.3	Writing down the cover letter for sending out the Bulletin
A2.4	Networking to increase the spreading of the Bulletin
A2.5	Monitoring the spreading of the Bulletin

Propose a list of potential feedings towards other tasks/work packages

1	Internally to the WP6, it is connected with the HLPF (T6.1)
2	It represents one of the different tools included in the Communication Strategy (WP7)
3	It can emphasize findings/outcomes from WP2
4	It might be an up-scaling mean for tasks of several WPs (such as 4, 5)

Propose a list of potential feedings necessary for your task accomplishments from other tasks/work packages

1	WP 2 "Study & Analysis" findings about background in matter of pandemic preparedness and response
2	WP3 because it is the folder containing the definition of the action plan
3	WP4 that is the citizen consultation so that there are elements society-driven
4	WP5 "MML" is the other key-component of societal challenge/empowerment

Timetable of the main activities

1 st Bulletin	February 2015
1st Deliverable	June 2015
2 nd Bulletin, 3 rd Bulletin, 4 th Bulletin	July 2015, January 2016, July 2016
2nd Deliverable	December 2016
5 th Bulletin, 6 th Bulletin, 7 th Bulletin	January 2017, July 2017, December 2017
3rd Deliverable	December 2017



ANNEX II.a – Presentation of task 6.2 rationale at KoM

After “Who is Who”...
Who is supposed to do What and How.
Partners’ Roles and Perspectives in ASSET

Valentina Possenti
P08 – ISS

As ASSET Partner,
Who are we in the Project?

- Beside the function of Scientific Coordinator, ISS will be leading WP6 “Policy watch” (Start: June 2014 - End: December 2017)
- ISS-CNESPS will be participating in ASSET with a double expertise: both on public health issues and on risk communication/management
- The main output is the “Pandemic Policy Bulletin” (T6.2) with three “Pandemic Preparedness and Response Bulletin Reports” (D6.4, D6.5, D6.6)
- This activity “lives” in WP6 with the “High Level Policy Forum” (T6.1; led by TIEMS) as Alberto showed before

What are we going to do in ASSET?

• Basically, our role as ASSET Partner is linked to the semester **Bulletin** that namely is a *communication product*

The Process of Communication: identifying the stages of the Communication Lifecycle

How do we think to do this work? 1/2

- *What is it?*
 WP6/CoP definition of Bulletin scope and objectives: an updating/dissemination tool/activity on established plans and/or strategies, statements, etc. about public health emergencies - especially pandemics - developed at different levels (transnational, national, regional, local) in EU
- *What kind of contents are we going to include?*
 Both EIDs (pandemic flu, Ebola, dengue, H7N9, etc.) and crisis management issues, PHEP
- *Whom is it addressed to?*
 The target is made by the wider ASSET stakeholders community plus relevant public health authorities and policy making institutions

How do we think to do this work? 2/2

- *Which sources will be used?*
 EU pandemic plans as well as relevant literature information plus inputs from the ASSET CoP Partners

Additional features:

- With a module/column-based architecture (electronic journal style)
- Readers’ participation will be foreseen
- Applications will be promoted to constitute the editorial committee

What do we think it could be our added value to the Project?

We will try to combine our competence/experience in matter of:

- **Epidemiological data** collection/analysis, research on vaccination,
- Stewardship in designing, writing, evaluating **pandemic plans** (preparedness, communication) at different levels (national/MoH, regional, local)
- Publishing **bulletin/scientific journal** (e.g. Annals of ISS, National Epidemiological Bulletin)
- **CoP** (Behavioural Risk Factors Surveillance Systems, Prevention Plans, training, etc.)
- **Membership in pandemic committees/boards**
- **Reference for Italy** nationally > MoH/Italian CDC (CCMP); internationally > ECDC
- **Networking** (alliance/contact) with relevant institutions/stakeholders

What do we think it could be the added value to us from the Project?

A really **challenging experience** since it is a quite “extra”-ordinary amount of activity, given the high heterogeneity of issues. Finally, it is our first engagement with **MMLAP**

What do we think it could be our contribution to the “Identity” of the Consortium?

Within the “internal” consortium strategy of “*forging a partnership*”, we will try to:

- “*keep on the buzz*” in the ASSET CoP, highlighting and empowering inputs, making them inspiring insights
- involve all the ASSET CoP Partners according to their own properties, even if they are not the most interested actors
- (cor)relate things, opinions, thoughts, ideas, which should “meet” one each other, harmonizing them



ANNEX II.b – Discussion thread about T6.2 on the ASSET CoP web platform

6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Monday, 30 June 2014, 2:52 PM

Dear Colleagues, the WP6 has begun on the 1st June and will be lasting for the whole project. As we can read in the ASSET DOW, WP6 will ensure a reflection on EU strategic priorities about pandemics and a regular monitoring other EU related initiatives and policy developments at local, national and European levels, in order to better connect with policy cycles. It will also aim to liaise with Research or Policy EC services involved in [Challenges 1 \(Health, demographic change and wellbeing\)](#). At ASSET KoM (held in Rome on 26-27th May) we have already presented the activities to be carried out within WP6: **T6.1 High Level Policy Forum** Leader: TIEMS Start: m6 End: m48 - Start: June 2014 - End: December 2017. Contributors: ISS, DBT, FFI, NCIPD, EIWH; **T6.2 Pandemic Preparedness and Response Bulletin** Leader: ISS Start: m6 End: m48 - Start: June 2014 - End: December 2017. Contributors: NCIPD, UMFCO, HU In particular, we contact you as task leader for 6.2, since the **Editorial Committee of the Semester Bulletin** has to be now established. You would remember that at the KoM we promoted applications to constitute this Editorial Committee but we think that you have necessarily to be involved because of your role in ASSET: as contributors (NCIPD, UMFCO, HU), as T6.1 leader (TIEMS), as communication leader (ZADIG). The main activities of Bulletin Editorial Committee will be: to gather, filter and edit relevant information, to keep abreast the Consortium of the main policy developments in order to facilitate the project alignment with policy cycles. We would appreciate whether the Editorial Committee of the Semester Bulletin was established by the end of July 2014. The first Semester Bulletin will be published at m12 (i.e. by 31st December 2014) so that in ASSET we are required to issue **seven editions of this Six-month Electronic Bulletin**. Related deliverables are the three "Pandemic Preparedness and Response Bulletin Reports" D6.4: M18-jun 2015 (2 Semester Bulletins published); D6.5: M36-dec 2016 (3 Semester Bulletins published); D6.6: M48-dec 2017 (2 Semester Bulletins published). As general idea, the ASSET Semester Bulletin is supposed to collect and disseminate information on policy initiatives devoted to pandemics and related crisis management, policy developments at local, national and European levels. Notably the Bulletin will monitor current status of EU national pandemic plans and eventual modifications, and it could correspond to an updating/dissemination tool/activity on established plans and/or strategies, statements, recommendations, etc. about public health emergencies - especially pandemics - developed at different levels (transnational, national, regional, local) in EU. Contents that could be included will be both on Emergent Infectious Diseases-EIDs (pandemic flu, Ebola, dengue, H7N9, etc.) and on crisis management issues, such as Public Health Emergency Preparedness (PHEP). Finally, it has to be connected with the Policy Forum that will consider and revise specific issues related to EU strategic priorities in pandemic communication, preparedness, and response. Sources to refer to will be EU Pandemic Plans as well as relevant literature information plus inputs from the ASSET Community of Practice Partners. Furthermore, we were thinking a module/column-based architecture (electronic journal style) could be implemented and readers' participation shall be foreseen. About the dissemination of the Bulletin, it will be circulated internally within the ASSET wider stakeholder community and sent out to relevant public health authorities and policy making institutions. Thus, we intend to work on this CoP web platform, mostly and in the forthcoming days are going to socialize different tools: a timing for activities, a template to work practically on it, a discussion about links with other ASSET tasks/WPs. We look forward to hearing from your ideas and inputs soon. The ISS team

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Barbara De Mei](#) - Monday, 14 July 2014, 11:06 AM

Dear Colleagues, after our very first communication about **T6.2 - Pandemic Preparedness and Response Bulletin**, as we said before, we would like to provide you with more practical information.

A) The ASSET Semester Bulletin Editorial Committee

1. Establishing Our first subtask within T6.2 is to establish the **Editorial Committee of the Semester Bulletin**. As we already said in our previous communication, you would remember that at the KoM we promoted applications to constitute this Editorial Committee but we think that you have necessarily to be involved because of your role in ASSET: as scientific contributors (NCIPD, UMFCO, HU), as T6.1 leader (TIEMS), as communication leader (ZADIG). Donato Greco is invited, too since his role of ASSET Quality manager and as expert on this issue. Just to briefly remind you the main activities of the ASSET Semester Bulletin Editorial Committee, they will be: to gather, filter and edit relevant information; to keep abreast the Consortium of the main policy developments in order to facilitate the project alignment with policy cycles. **ACTION** Thus, please communicate us at latest by Friday August 1st, 2014, 1st (by email to: valentina.possenti@iss.it) the names of people representing you as ASSET Partner for being members of the Semester Bulletin Editorial Committee. *To let us better detect this issue, the object of your email should be (just copy and paste):* **A1) T6.2 - Pandemic Preparedness and Response Bulletin.**

2. Working together Once the ASSET Semester Bulletin Editorial Committee has been established, we can start thinking about contents and format that the Bulletin should have in general and, more in particular, could begin to envisage the first issue (to be published at m12, i.e. by 31st December 2014). We would propose to work on the ASSET Community of Practice web platform where, in the WP6 area, we have both a Forum (a) and a "Working in Progress" space available (b): a) [Home](#) / ► [My courses](#) / ► [ASSET Community](#) / ► [WP6](#) / ► Forum / ► [WP6 Forum](#) b) [Home](#) / ► [My courses](#) / ► [ASSET Community](#) / ► [WP6](#) ► Work in progress / ► [WP6 work in progress](#) / ► [View list](#)

ACTION Please, let us know by email to: valentina.possenti@iss.it whether it is fine to you this working mean/method and how you would organize the concepts (for instance, we should open a thread in the Forum every issue of the Bulletin we will be working on?). If not, indicate other ways you prefer or think more efficient to work together on this task. *To let us better detect this issue, the object of your email should be (just copy and paste):* **A2) T6.2 - Pandemic Preparedness and Response Bulletin.**

B) The ASSET Semester Bulletin

1. Timing Even we cannot decide now a very strict timeline to be followed in accomplishing this task, we can start thinking a sort of standard "roadmap" that can be further adapted each time. Notably, a slight exception has to be made for the current semester (the first to be considered for testing; where we would like to have an indicative index by the end of September 2014), afterwards we will be going full speed. Then, we would propose to organize the work within each semester (they are 7 in total) as follows: A conference call of the ASSET Semester Bulletin Editorial Committee every 45 days more or less, so that we can reach 4 on line meetings for each Bulletin, at least 3 when there are long holiday periods; The semester could be halved in two parts: the first that should be more about "thinking, searching" and the second instead more on "writing, editing"; Single steps in delivering the Bulletin can be individuated: a very first draft by the end of the fourth month, a more consolidated version by the fifth month, the final issue to be ready by the m6. **ACTION** These are very starting points, please add and contribute (by email to: valentina.possenti@iss.it) to better schedule our collaborative work as you prefer. Then, we will make circulate the shared deadlines in a Gant chart so that we can visualize our T6.2 progressing from now till the end of the Project. *To let us better detect this issue, the object of your email should be (just copy and paste):* **B1) T6.2 - Pandemic Preparedness and Response Bulletin.**

2. Working together At the KOM in Rome, Alberto Perra presented the logical framework which ASSET is based on (the figure is retrievable both in Alberto's presentation and in D1.1). As it has been shown, WP6 is not directly linked with other activities but has necessarily to: consider findings from WP1 (terms) and WP2 (scientific background); go along with achievements from WP3 (action plan), WP4 (citizen consultation), WP5 (mobilization and mutual learning); be consistent with communication (WP7). **ACTION** It is only a vary general idea, please give a your own contribution (by email to: valentina.possenti@iss.it) about the potential multiple interactions of this activity with other tasks/WPs which you are involved in. *To let us better detect this issue, the object of your email should be (just copy and paste):* **B2) T6.2 - Pandemic Preparedness and Response Bulletin.**

**Re: T6.2 - Pandemic Preparedness and Response Bulletin**by [DONATO GRECO](#) - Monday, 14 July 2014, 1:01 PM[CVing greco IDRC 2014.doc](#)

dearest, yes I am glad to contribute to the Bulletin: a good opportunity to make communication efficient, can well be a place where good and bad Outbreak stories are reported. Attached find a short CV. Thanks, Donato Greco

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Valentina Possenti](#) - Monday, 14 July 2014, 4:06 PM

Dear Donato, thanks a lot for you OK and welcome on board! You have already mentioned an objective of our Bulletin (to make communication efficient) and a very appealing content it should deal with (good and bad Outbreak stories to be told). Let's take what other Partners think, too and then we could begin this challenging activity that we are going to build up together! Bye, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Eva Benelli](#) - Monday, 14 July 2014, 4:32 PM

Dear Valentina, dear Donato, I am pleased to propose me for the editorial committee of the semester bulletin. As with any Asset communication activities, it is important to note that the website will offer support and visibility to the bulletin and that the bulletin itself should be included in our communication strategy. Ciao, eva

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Valentina Possenti](#) - Tuesday, 15 July 2014, 9:44 AM

Dear Eva, we are really glad to have you in the Editorial Committee! Thanks a lot also for the precious elements that you add such as reminding us the ASSET website as hosting and showcasing the Bulletin which, in turn, will be a component of the overall communication strategy. Then, in the coming times, we could start thinking about what this dissemination product would deal with. In the meanwhile, feel absolutely free to comment, add and modify items characterizing this our collaborative work. Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Valentina Possenti](#) - Monday, 4 August 2014, 11:36 AM [ASSET Semester Bulletin time-chart.docx](#)

A1) T6.2 - Pandemic Preparedness and Response Bulletin To date, the ASSET Semester Bulletin Editorial Committee is formed by (representatives from ISS still to be included): **Officially received:** [Eva Benelli](#) (ZADIG), [Donato Greco](#) (ZADIG), Manfred Green (HU), Adriana Pistol (UMFCD), Mircea Ioan Popa (UMFCD), Thomas Robertson (TIEMS) **Pending confirmation:** (NCIPD) Further, at the KoM (Rome, May 26th-27th) we promoted applications from each ASSET Partner to constitute this Editorial Committee but, beside these indicated participants, we would say it is important another contributor should be included, PROLEPSIS, because of the tasks of coordinating scientific dissemination has been assigned.

A2) T6.2 - Pandemic Preparedness and Response Bulletin At least at the moment, it seems to be quite fine to work on the ASSET Community of Practice web platform where, in the WP6 area, we have both a Forum and a "Working in Progress" space available. For instance, in the Forum, we should open a discussion about every issue of the Bulletin we will be working on. In September, we will begin thinking practically on the first issue to be published at m12, i.e. by 31st December 2014.

B1) T6.2 - Pandemic Preparedness and Response Bulletin Have a look at the time chart available in the WP6 area (in form of attachment in this thread as well as in the WP6 "Working in Progress" space) that can let us better visualize our T6.2 progressing from now till the end of the Project. It is in progress, of course, and simply represents in a graphic way what we have already communicated. So, everyone can feel free to add, modify, improve, comment, etc.

B2) T6.2 - Pandemic Preparedness and Response Bulletin *Nil more to be added up at this stage than what has been communicated before.*

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Valentina Possenti](#) - Tuesday, 5 August 2014, 3:40 PM

Dear Colleagues, It is a pleasure to communicate that Professor Mira Kojouharova will represent the NCIPD as member of the ASSET Semester Bulletin Editorial Committee. We will be updating you all with service alerts mainly during this month of August. Then, in the early September we will begin to work on the first issue. Best, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Barbara De Mei](#) - Tuesday, 9 September 2014, 4:35 PM

Dear All, welcome back to this topic! We are glad to inform you that the Semester Bulletin Editorial Committee has been successfully established. The names of members (in number of 11) are: Task leader: (ISS) Alberto Perra, Barbara De Mei, Valentina Possenti; Task contributors: (HU) Manfred Green; (UMFCD) Mircea Ioan Popa, Adriana Pistol; (NCIPD) Mira Kojouharova; T6.1 leader: (TIEMS) Thomas Robertson; Scientific Publication leader: (PROLEPSIS) Agoritsa Baka; Communication leader: (ZADIG) [Eva Benelli](#), [Donato Greco](#). Then, exploiting points indicated previously, we would propose to work on this CoP web platform mostly. An editorial proposal will follow soon, in the meanwhile we would like to highlight that the contents of this Bulletin (hypothetically with a module/column-based architecture, as an electronic journal style) could be: General crisis management issues, such as Public Health Emergency Preparedness (PHEP), Emergent Infectious Diseases-EIDs (in particular, in the first Bulletin issue we could focus on Ebola as major specific topic), monitoring current status of established national pandemic plans and/or strategies in Europe, as well as statements, recommendations, etc. about public health emergencies, epidemics included. We look forward to hearing from you about it! Barbara, Alberto and Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Valentina Possenti](#) - Thursday, 4 December 2014, 1:51 PM

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@**Editorial Committee**: as we have written in the message to you all as members of the Editorial Committee, here you are the material for designing the ASSET biannual Pandemic Preparedness & Response. We wait for a feedback from you by Friday Dec. 12th @**All Partners**: where possible, even in this design phase, inputs and insights from everyone are welcomed! Best, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Valentina Possenti](#) - Thursday, 4 December 2014, 1:53 PM[2. ASSET-PPRB.ppt.rar](#)

A third and last attachment, it was a file-load too heavy in only one post

Re: T6.2 - Pandemic Preparedness and Response Bulletinby [Thomas Robertson](#) - Thursday, 11 December 2014, 1:28 AM

Dear Valentina, Thank you for the excellent material on the PPRB. The design you present would be informative and interesting, and it is easy to imagine finding content for the topics in the design. A question I would raise is to what extent the design reflects the PPRB mission and focus as expressed in the DOW. The DOW emphasizes disseminating information on "policy initiatives" and "policy developments at local, national, and European levels" to ensure for ASSET "a reflection on EU strategic priorities about pandemics" and to "better connect with policy cycles in constant liaison with Research or Policy EC services involved in Challenges 1 (Health, demographic change and wellbeing)". This emphasis on policy seems to be more about what is going on within government organizations, rather than what is going on in ASSET, the world, the web, and on social networks about pandemics. Does my interpretation seem right? If it is, then I see two alternatives. One would be to follow the design you present, and tie the PPRB to policy by considering each section a source of information about policies and an opportunity to describe their impacts. A second alternative



might be to organize the report around specific sources of policy information, and establish regular reporting from them. Thoughts for consideration!
Best, Tom Robertson, TIEMS

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Mircea-Ioan POPA](#) - Friday, 12 December 2014, 12:31 PM

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Dear all, In my opinion there are some very good points in Tom Robertson's message (and those are in line with my thoughts). The structure looks very well. In the first document I introduced some comments – I will attach it and send by email, too. Probably it would be not very easy to "obtain" the materials from public health authorities but -we should inform them, -we should request feed-back, -we should invite them to participate in "our bulletin" (that is "for all"). So, in my opinion, the first alternative proposed by Tom would be the alternative to choose. With thanks and best regards, Mircea

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Anna Kurchatova](#) - Wednesday, 17 December 2014, 1:29 PM

Dear Valentina, Thank you for the good proposition for PPRB structure and design. With apologies for the delayed answer, we also agree with Tom's comments. The focus of PPRB as per DOW is around policy developments, comparison to previous policies, and maybe some commentary on the context and eventual effect of these policies. We believe the presented design can be used, with priority given to Sections 5, 2, and 3. We imagine Section 5: What's New from the World of Public Health Institutional Actors and Section 2: What's New from the World of Pandemic Preparedness and Response as the most prominent sections. If possible, the information in Section 2 should provide the specific context for Section 5 through [news](#) The idea behind Section 3: What's New from the World Wide Web is very good, especially when logically connected to Section 5 -depending on the respective policies, presented in each issue, links to relevant commentaries from the World Wide Web (if available), can be provided. This again depends on the situation and whether the policies are widely discussed... As you suggest, links to relevant information from Social Networks may be provided, again maybe centring around the policies at hand. However, as anyone can write and contribute to social networks, how will we filter social network information – should we, for example follow experts' on Twitter? Or LinkedIn? Which people, which networks? Should we consider non-experts, who are, however, influencers? Our concern is that finding information in social networks and deciding which information to use from there can be very time consuming without a clear strategy. Section 6: Image Challenge is a great idea to increase the clickability of the bulletin. Do you think that a tag cloud widget is feasible and useful for Image Challenge? As well, we have a small comment related to the use of "semester". As "semester" is an ambiguous word, which usually denotes half of an academic year (so, 4 to 5 months), we suggest to instead use the word "biannual", which clearly means "twice a calendar year", or, "every six months".

Thank you for the good work! The NCIPD team

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 19 December 2014, 6:43 PM

Dear Tom, Mircea and Anna, thanks you so much for your constructive replies and appropriate input! Alberto, Barbara and I have been discussing a lot about suggestions you gave us for making the Bulletin really even more embedded in the "Policy Watch" framework and into the overall philosophy of the ASSET project. In fact, we think about the rationale (need to re-establish trust between research/policy making and citizens), the strategy (improving efficiency and efficacy of communication between this two "worlds", according to the scenario of the Science in Society and, to do that, the European approach of the Responsible Research and Innovation) and the outcome (getting the citizens not only beneficiaries of an improved communication but also promoters within the policy cycle of a new policy aimed to preparedness and response against pandemics and epidemics). Specifically, linking up Bulletin & Policy cycle in matter of PPR requires targeting different groups: dedicated people who should find the Bulletin essential to act in favour of the project objectives, then informed subjects who could look at it as a useful tool, finally a larger population of those thinking that it is simply interesting. In our editorial board, we have to pinpoint the dedicated people (our favourite target) who have a certain weight in the policy cycle, not necessarily ONLY the decision makers as intended in the classic interpretation but also other stakeholders (e.g. social network inputs), following the mentioned ASSET philosophy. The recent experience that we had at the TELL ME Final Conference in Venice seems to support this approach that is also in the core of the MMLAP projects where empowerment/enlightenment of policy level has to be driven by empowered/enlightened citizens. Furthermore as Tom noticed in his post, it is important for ASSET to head toward the new H2020 approach, and more specifically according to "Health and Demographic Change and Well-being" principles which indicates some priorities for coming years. It is said that it is of paramount importance providing decision-makers with (effective) suggestions about how managing pandemic (or other priority) situations. ASSET would contribute identifying and promoting the "channels" and the "frame" for making easier and stable the communication within different groups in the society and, by that, the efficacy of the policy making. We think this Bulletin has to be seen as a pretty "experimental" object: it is not an official source and does not have a static and rigid architecture, so that its 7 issues could differ both according to what really occurs in matter of PPR and depending on the capacity of Editorial Committee Members to retrieve information to be published. Then, we cannot forget that the Bulletin is generated within ASSET and it would be wired and/or confusing for Readers not having a link on what is going on in the Project. Also because we have to consider the findings from the different WP2 tasks that could enlighten, through the PPRB, many useful aspects for preparing the following mobilization and mutual learning action plan. More practically, for sure, we can enter a seventh box that includes eventual modifications of pandemic plans in EU, and in doing this we have good source to use (see the table provided by ECDC). About the mailing list of Relevant Stakeholders whom the Bulletin is addressed to, we can ask competent people in the field and, at the same time, have to indicate useful national representatives in each Country. Therefore we will update members of the Ed.Com about operative tasks and deadlines, but also invite all Partners and Colleagues to share other ideas and inputs about this issue. Thank you all. ISS team

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 2 January 2015, 12:04 PM

[QAQ_ASSET_T6.2.docx](#)

Dear Members of the PPRB Editorial Committee and All, we would like to show you the QAQ about T6.2 that we have just uploaded as required by our Quality Officer Donato. We think in fact that, beside being a valid tool to ensure a high quality level, it represents also a good opportunity to reason about a single task we are required to lead in ASSET. Then, in order to move forward in delivering the first PPRB issue, we plan to assign tasks and deadlines by the end of the next week. All the best, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [DONATO GRECO](#) - Friday, 2 January 2015, 8:18 PM

GRAZIE Valentina, this is very welcome, I will soon give a good reading!

Re: T6.2 Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Thursday, 15 January 2015, 10:40 AM

NOTE: PPRB EDITORIAL COMMITTEE MEMBERS HAVE BEEN ALSO SENT A PERSONAL MSG BY COP. WE WOULD ASK ALL PARTNERS TO CONSIDER THIS WEB PLATFORM THE PRIVILEGED TOOL TO GIVE A THEIR OWN CONTRIBUTION & WORK ON THE ISSUE.

T6.2 PPRB. Towards the first issue

Hi Everybody, After our brainstorming process, it is now the time for action! As you can see in the T6.2 QAQ (final version has been posted on the [WP8 > Forums > WP8 Forum > quality questionnaire](#) on Wednesday, January 2015, 14 at 10:52 a.m.), this task is made of two main parts: **1) producing, 2) disseminating** the Bulletin.

1) Given all the ideas, inputs and contributions which have been raised, we would say that we all have to bring concrete contributions about the thematic areas we have decided. Of course, we ask each of you to act as "spiders on the web" finding out relevant information to include in our Bulletin sections. We would invite you to consider not only "master" sites, but also other portals which are relevant for instance in your own country or geographic area (e.g. eastern or Scandinavian Europe, Balkans, Middle east, etc.). For example, in Italy we mainly refer to



EpiCentro: <http://www.epicentro.iss.it/> Additionally, as we have already outlined in the QAQ for T6.2, we do not think about any editing of contents (that means we are not writing original articles), but can look at this Bulletin as a tool to highlight relevant information about PPR. We would make a tentative proposal for the first issue work timetable as follows. Identify, select the information (official documents/reports, link, articles) concerning each area covered by the Bulletin minding that the content has to be in line with the time interval of the Bulletin issue, and make a 5-10 lines summary. Send to Valentina [valentina.possenti@iss.it] your proposals (**deadline: Tuesday, January, 27**): **What's new from the world of Pandemic Preparedness & Response**. A few possible examples in this "core" folder: Ebola Virus Disease, Risk Communication, Public Health Emergency Preparedness, Evaluation of Pandemic Plans, Reports on surveys carried out in Europe (general population, health professionals, other) about pandemics or epidemics. **What's new from the world of Public Health Institutional Actors** intended as a fix box to be fulfilled in with major achievements by the most important institutions that we will decide to cover, i.e. WHO, WHO/EU, ECDC, CDC, others. **What's new from the world wide Web dealing with Pandemic Preparedness & Response**. For this first issue, for instance one choice could be to highlight the TELL ME Project website. **What's new from the world of Social Networks**: a brief section (with a few lines, sounding like an editorial) that updates about main ideas and insights circulated by the most used social media. And, finally, the two side-items: appropriate [news](#) from ASSET and a "snapshot": make your own proposition or give us your suggestions on that!

We will assemble all materials and we will send you back a draft **by Friday January 30** That version could be discussed on a Skype call (please, **indicate your favourite date at:** <http://doodle.com/iuuyzw4mhkva7cxm>; **note that it is set with CET**).

The last version will be processed by Zadiq that is in charge to put a graphic layout onto the Bulletin so that hopefully the definitive (or at least a pre-definitive!) version of the first issue could be presented by our next meeting in Geneva (**February 24-25**) to the ASSET Community and, thereafter, delivered to the list of our stakeholders.

2) About this last point that concerns the mailing list of addressees (who they are is widely described in the above mentioned quality document on the CoP web platform), we would ask you to provide us with representatives both at local and national levels in your own Country/geographic area and internationally. This list will be increased till m48 that is the end of the Project and the last Bulletin delivery as well. Thanks in advance for this challenging collaboration! Valentina, Barbara and Alberto

Re: T6.2 Pandemic Preparedness and Response Bulletin

by [Harald Drager](#) - Monday, 19 January 2015, 11:34 AM

[ASSET 2014 Final Introduction to the HIGH LEVEL POLICY FORUM.pdf](#)

Dear Valentina, Barbara and Alberto, I trust you include a presentation of and invitation to ASSET HLPF in the first Bulletin? I include the last version of the introduction, with the date included. However, I need a link for introducing the background on Ranieri Guerra, or give me his or his secretary e-mail address and I will contact him. Best regards Harald, TIEMS President

Re: T6.2 Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Monday, 19 January 2015, 3:12 PM

Hi Harald, about including some material concerning ASSET HLP Forum in the first issue of the Bulletin, it represents an expressed item in the depiction of work (both in the DOW and in our following draft documents). Then, for sure we are encompassing this relevant task to the end of the whole project and, in particular, being the HLPF and the PPRB the two sides of the same coin (=WP). Tom seats in the PPRB Editorial Committee so that he could make us know whether he thinks the ending place and layout of this [news](#) are appropriate in the economy of the Bulletin. Best, Valentina

Re: T6.2 Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 30 January 2015, 3:38 PM

[PPRB_drafting a Proposal.doc.docx](#) [PPRB Contribution NCIPD January 2015.docx](#)

[PPRB Contribution UMFDB January 2015.docx](#)

Dear Editorial Committee members and All, we would invite you to partake in the Skype call that will be held on next **Monday February 2nd - CET 11.00-12.00 a.m.** (one of the proposed slots that got more subscriptions on the Doodle). Then, we would ask you to indicate your Skype ID. We would make here available all proposals which have been gathered in this "brainstorming" period. Have a good reading! Valentina, Barbara and Alberto

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [DONATO GRECO](#) - Monday, 2 February 2015, 7:17 PM

Dear Vale, I believe that an ASSET advancement dedicated session should be in the bulletin, so that I am asking those who deliver products to prepare a short summary for the bulletin, let me know if this is ok and what format you prefer. Ciao, Donato

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Tuesday, 3 February 2015, 6:00 PM [PPRB Editorial Committee Virtual meeting.doc.docx](#) [PPRB Highlights from six WP2 tasks.docx](#) [PPRB Dissemination - Stakeholders inventory, a base.docx](#)

Dear Donato, you are always the first! Please, find here the **Report of our Virtual meeting about PPRB**, that was held yesterday. Mind that these topics which have been here reported are not the only one which will be published finally, so we would invite all Editorial Committee members and Partners as well to propose, suggest, modify, ... Then, there are also enclosed the two other files that are recalled in the minute report. One is exactly the description of this **brief summary request** that is addressed to our **six WP2 tasks (T2.1-2.6) leaders!** Have a nice evening, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Kjersti Brattekas](#) - Friday, 6 February 2015, 1:14 PM [PPRB Highlights from T2.6.docx](#)

Dear Valentina, Please see the attached file for the PPRB summary of task 2.6. Do not hesitate to let me know if there is anything else you would like in this summary. Have a nice weekend! Best regards, Kjersti

Re: T6.2 Pandemic Preparedness and Response Bulletin

by [Thomas Robertson](#) - Sunday, 8 February 2015, 2:01 AM

Dear Valentina, I will provide a summary of the HLPF activities using the "What's New in ASSET" template. Best, Tom

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Thomas Robertson](#) - Sunday, 8 February 2015, 2:34 AM [PPRB Highlights T6.1 2-15.docx](#)

Dear Valentina, Please see attached a summary of T6.1 in the template format. Please let me know if you have any questions or would like changes. Best, Tom

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Monday, 9 February 2015, 10:15 AM

Dear Estelle and LYONBIOPOLE team, Kjersti, Tom, thanks a lot for sending your contributions to be included within the first PPRB issue coming soon! **@Tom**: we will consider also this further updating about your HLPF (T6.1), but you all as **WP2 Task Leaders** are also specifically supposed to give the summary on the task you have been leading within WP2. In the case of TIEMS, the request was addressed about T2.3 (Crisis Participatory Governance). Might we ask Kailash who has submitted the related Report? **@All**: for better addressing the evolution of this task, you can find all most



recent "items" to be assembled in the first PPRB issue on "[WP6 work in progress](#)". As it can be retrieved within the **February 2nd Skype Call minute Report**, assigned contributions/texts are expected by next Friday February 13th. We look forward to receiving any feedback from you, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Thomas Robertson](#) - Tuesday, 10 February 2015, 9:26 PM [PPRB Highlights T2.3 2-15.docx](#)
Dear Valentina, Please find attached the summary for T2.3. Best, Tom

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Anna Kurchatova](#) - Sunday, 15 February 2015, 10:05 AM [PPRB Dissemination - Stakeholders BULGARIA.doc](#) Dear Valentina, Please find attached the updated mailing list for PPRB dissemination in Bulgaria. Best regards, NCIPD team

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Kailash Gupta](#) - Monday, 16 February 2015, 1:53 PM
Dear Valentina, I am giving below my two contributions for considering to include in the first issue of the PPRB. **Prof. Kailash Gupta makes ASSET presentations in Turkey and India** Prof. Kailash Gupta of The International Emergency Management Society (TIEMS) made a presentation about the ASSET project to the faculty, research scholars, and students of the Centre for Excellence for Disaster Management, Earthquake Engineering and Disaster Management Institute, Istanbul Technical University, Turkey on December 15, 2014. The presentation was followed with a lively interaction lasting about one and half hours. Prof. Kailash Gupta also made a presentation about the ASSET project (and distributed copies of the ASSET brochure) in the session on Contribution of Different Disciplines to Disaster Management to the participants of the Disaster Management course at the Indian Institute of Management, Ahmedabad (Number 1 ranked business school in India and 26th in top full-time global MBA programs compiled by Financial Times) on January 12, 2015. He had designed the course that was offered first time in the institute's 54 year history. MBA, MBA Executive, and Dual-degree Exchange Students had opted for the course.

2015 H1N1 Outbreak in India by Kailash Gupta, Director, TIEMS – India Chapter In India currently there is an outbreak of H1N1. **According to media reports 485 people have died due to H1N1 between from Jan. 1 to Feb. 12, 2015**, which is more than double for the whole year 2014.

H1N1 Infected Cases and Mortality in India

Year	Reported Cases	Deaths
May-Dec. 2009	27,236	981
2010	20,604	1,763
2010	603	75
2012	5,044	405
2013	5,253	699
2014	937	218
Jan. 1 – Feb. 12, 2015	6,298	485

The deaths have occurred across 8 states, including Rajasthan, Gujarat, Maharastra, Madhya Pradesh, and Telengana. Seventy percent of the deaths are occurring within two days of positively testing for H1N1. The main cause of fatalities is the late detection of disease since testing facilities are not available in rural areas (two out of three people live in rural areas in India) and late treatment. Rajasthan is the worst affected state where deaths are continuing to occur, 11 of them on Feb. 15. In Rajasthan, till Feb. 15 this year 6,544 samples were tested for H1N1, out of which 2,569 were found positive, and 165 people died. The details according to districts in Rajasthan are available at <http://www.rajswashya.nic.in/CSSF.pdf.pdf>. In Gujarat state 136 people have died till Feb. 14 this year. The Australian Government has issued travel advisory, "If you are travelling to India, discuss influenza vaccination requirements with your GP or a travel health professional before departing Australia." The Associated Chamber of Commerce and Industry has estimated that the outbreak of H1N1 in Rajasthan and Maharashtra is expected to result in a loss of Rs. 5,500 crore (\$880 million) to the tourism and aviation industries. The positively infected people include incumbent Rajasthan Home Minister and former Chief Minister. Public assembly in schools have been stopped. The hospitals in Rajasthan do not have sufficient testing facilities and samples are being sent to out stations, which delays getting reports and treatment. About 1 million Tamiflu tablets have been procured by the government for treatment. The state government claims that they are doing door-to-door surveys, but this is doubtful. Advertising campaign are taking place. People are using face masks some even in wedding celebrations in Jaipur. The Rajasthan state government has set up a State Level Task Force for H1N1 headed by Dr. Ashok Pangaria that daily reviews the position. However, the Task Force consists of only physicians and administrators and does not seem to have social scientists or other sectors of the society. Up-stream risk communication is also missing. It appears that the learning from the 2009 H1N1 pandemic has not percolated and is not practiced. Thanks, regards, and looking forward to meeting you in Geneva. Kailash, TIEMS

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Tuesday, 17 February 2015, 1:41 PM
Dear Colleagues, I would like to thank you all for contributions provided in light of publishing the **First PPRB Issue**. To better address the amount of contributions gathered, please find them all (original versions of file received) in the **WP6 Resource Database**, listed as follows:
[ASSET Semester Bulletin time-chart.docx](#) File name: ASSET Semester Bulletin Time-Chart: a Version up-to-date, [PPRB Editorial Committee Virtual meeting.doc.docx](#) File name: February 2nd Skype call minute Report: deadlines and activities for the 1st PPRB issue, [PPRB_drafting_a_Proposal.doc.docx](#) File name: A tentative/approximative layout of the 1st PPRB issue, [PPRB Highlights from six WP2 tasks.docx](#) File name: Template to be followed by the six WP2 Task Leaders for editing a brief summary, [T2.2_PPRB_Highlights_2015_02_05.docx](#) File name: T2.2 brief summary, [T2.6_PPRB_Highlights.docx](#) File name: T2.6 brief summary, [T6.1_PPRB_Highlights.docx](#) File name: T6.1 brief summary, [PPRB_Contribution_NCIPD_January_2015.docx](#) File name: NCIPD former contribution for the 1st PPRB issue, [PPRB_Contribution_UMFDB_January_2015.docx](#) File name: UMFDB former contribution for the 1st PPRB issue, [Infectio_4_2014_\(PPRB_Contribution_UMFDB_January_2015\).pdf](#) File name: UMFDB former contribution for the 1st PPRB issue attachment, [PPRB Dissemination - Stakeholders inventory, a base.docx](#) File name: A Starting Stakeholders List to Disseminate PPRB, [T2.3_PPRB_Highlights.docx](#) File name: T2.3 brief summary, [T2.5_PPRB_Highlights.doc](#) File name: T2.5 brief summary, [PPR on Social Network.docx](#) File name: PPR on Social Network, [PPRB_Contribution_TIEMS_\(India\).docx](#) File name: PPRB contribution by TIEMS (India), [The importance of influenza vaccination.doc](#) File name: Latter contribution_UMFDB, [BASIC_no_05_2015.pub](#) File name: INFLEUNZA VACCINATION OF SOME SPECIAL GROUPS OF PEOPLE_by UMFDB, [Assessment_response.doc](#) File name: Assessment_response_by UMFDB, [How bad communication can destroy a well-planned vaccination programme.doc](#) File name: Bad communication ruining vaccination campaign_by UMFDB, [PPRB Dissemination - Stakeholders BULGARIA.doc](#) File name: PPRB Dissemination - Stakeholders Inventory_Bulgaria.
Pending contributions are still: Comment on a EU Disposition in matter of PPR by Donato; A small updated piece on 2015 H1N1 Outbreak in India by Kailash who will edit a longer paper to be published on the 2nd issue; A text about the latest Pandemic Plan issued in Victoria State (Melbourne) by Manfred.

About Brief Summary WP2 task leaders were asked, T2.1 (HU) and T2.4 Brief Summary (Zadig) are missing, but we can publish them in the 2nd PPRB issue as well. In these days, we will be working on revising the contributions from an editorial point of view so that an updated **presentation** will be given at the Geneva meeting next week.



In the meanwhile, we would let you all notice that only Bulgarian Colleagues from NCIPD have sent a **Stakeholders'** list for their own country. As it has been reminded before, PPRB has to be issued and disseminated to relevant stakeholders internationally, this is the reason why we invite to update the Inventory, even starting from the base provided. We look forward to update soon about PPRB delivery. On behalf of ISS team, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Kailash Gupta](#) - Sunday, 22 February 2015, 7:01 PM



[2015 H1N1 Outbreak in India.pdf](#)

Dear Valentina, As promised, I am attaching the updated piece on 2015 H1N1 Outbreak in India for PPRB first issue. Thanks.

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 6 March 2015, 3:38 PM



[PPRB_1st Issue.pdf](#)

[Asset_page 5 \(item 1\) Eurosurveillance.pdf](#) [Asset_page 5 \(item 2\) Bulgaria.docx](#) [Asset_page 5 \(item 3\) Romania.docx](#) [Asset_page 5 \(item 4\) India.pdf](#) Dear All, I am glad to show you a preliminary version of the first PPRB issue! Only congrats are accepted :) Jokes aside, we tried to capitalize all contributions we received (thank you for collaborating!) mostly. We hope you really appreciate content editing and the layout. I make available the pdf file of this drafted issue and files which is not possible to link to at the moment because not on the web (I have to split in three attachments). Here you are the first slot. Have a pleasant we. Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 6 March 2015, 3:39 PM

[Asset_page 5 \(item 5\) California.docx](#) [Asset_page 6 \(item 6\) ECDC.docx](#) [Asset_page 8 \(item 7\) T2.1.docx](#) [Asset_page 8 \(item 8\) T2.2.docx](#) [Asset_page 8 \(item 9\) T2.3.docx](#) The second slot

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 6 March 2015, 3:42 PM

[Asset_page 8 \(item 10\) T2.5.docx](#) [Asset_page 8 \(item 11\) T2.6.docx](#) [Asset_page 8 \(item 12\) T6.1.docx](#) [Asset_page 8 \(item 13\) T6.1 HIGH LEVEL POLICY FORUM leaflet.pdf](#) The third file-set

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Wednesday, 11 March 2015, 12:33 PM



[PPRB_1st Issue.pdf](#)

I make available here the latest version of the PPRB First Issue as it has been released to Zadig, the Partner in charge of disseminating this ASSET - at least - communication tool. Instead, other files remain the same. Whether you have inputs to improve the work done, "*Speak now or forever hold your peace*" :-)... Or at least, we will develop late suggestions in the issues coming hereinafter (the next is supposed to be issued within summer). Best, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Mircea-Ioan POPA](#) - Thursday, 12 March 2015, 6:14 AM

I speak now: Thank you, very much, Valentina and all! With best regards, Mircea

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Pania Karnaki](#) - Thursday, 2 April 2015, 3:59 PM Dear Valentina, thank you all for your hard work in preparing this 1st issue, which includes very interesting subjects. However, it is our impression, especially with a view to the sustainability of this endeavour that we could make it smaller and include links in the section: "*What's new from the world...*" as a table of contents of sorts. regards, Pania & Agoritsa

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Friday, 3 April 2015, 4:12 PM



[Last PPRB_1st Issue.pdf](#)

Dear Pania & Agoritsa, thanks for your suggestion, I take advantage of your post to update you all on the evolution of this work. Eva Benelli (Zadig) indicated us how to improve the **editorial layout of the Bulletin** as follows: cover page with a "real" title, index – table of contents, a longer editorial also including info about ASSET and in particular on the Bulletin itself, articles' text on two columns, text boxes intended as apart from article text, bold first lines or headings in the texts, eliminating all links to pdf to be uploaded on the website (otherwise html pages should have been generated). On the contrary links to websites remain available, (attempt of) disclaimer and editorial committee members. Then, I make this revised version available here (notice: it has still to be further validated with regard to the language and the graphic layout). About the **dissemination**, only NCIPD and IPRI provided a stakeholders' mailing list, we invite you all to indicate national –for your own country- as well as international addresses to be reached by this ASSET tool. Have a pleasant Easter, Valentina

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Pania Karnaki](#) - Thursday, 16 April 2015, 3:16 PM



[ASSET contacts Prolepsis.csv](#)

Dear Valentina, I attach a dissemination list which includes contacts from across the EU including Greece. Is this ok? KR, Pania

Re: T6.2 - Pandemic Preparedness and Response Bulletin

by [Valentina Possenti](#) - Monday, 27 April 2015, 1:06 PM



[ASSET BULLETIN - ISSUE 1, APRIL 2015.pdf](#)

Dear Pania, sorry for my late reply but my spring break ended up just yesterday! Thanks a lot for the dissemination list that we have forwarded to Zadig, the partner in charge of spreading the Bulletin out by an official ASSET account and on the website as well. To update all Consortium about how the first Issue has been shaped further, please have a look at this pdf text version here attached. It is about to be sent out very soon. Best, Valentina



ANNEX II.c – A proposal for the first PPRB Issue

Action plan on Science in Society related issues in Epidemics and Total pandemics

ASSET share and move to face nasty bugs

The First Issue of ASSET Pandemic Preparedness and Response Bulletin¹ | February 2015

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What's new from the world of Social Networks

TWITTER

FACEBOOK

YOUTUBE

ProMED

LinkedIn

Research Gate

What's new from the world of Public Health Institutional Actors

- Internationally
 - [WHO evaluates Ebola outbreak one year after it began, in-depth papers trace virus spread and containment efforts](#)
 - [ECDC](#)
 - <http://www.ecdc.europa.eu/en/healthtopics/pandemic-preparedness/national-pandemic-preparedness-plans/press/national-pandemic-preparedness>
- Nationally

What's new from the world wide Web dealing with Pandemic Preparedness & Response

Tell Me Project:

<http://www.tellmeproject.eu/>

What's new from the world of Pandemic Preparedness & Response (several issues)

The SnapShot at the 1st ASSET PPRB issue

What's new from the world of ASSET

WPs	Tasks	Deliverables	Events	Meetings
ASSET.eu				

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Commento [PV 1]: TIEMS remarks the importance of highlighting HLPForum

¹ A) The focus is around policy developments, comparison to previous policies, and maybe some commentary on the context and eventual effect of these policies; B) Information in *What's New from the World of Pandemic Preparedness and Response* (2) should provide the specific context for *What's New from the World of Public Health Institutional Actors* (1) through news; C) *What's New from the World Wide Web* (3) should be logically connected to Section 1 -depending on the respective policies, presented in each issue, links to relevant commentaries from the World Wide Web (if available), can be provided. This again depends on the situation and whether the policies are widely discussed; D) Relevant information from *Social Networks* (4) may be provided, centering around the policies at hand. However, as anyone can write and contribute to social networks, how will we filter social network information – should we, for example follow experts' on Twitter? Or LinkedIn? Which people, which networks? Should we consider non-experts, who are, however, influencers? Our concern is that finding information in social networks and deciding which information to use from there can be very time consuming without a clear strategy.



ANNEX II.d – PPRB Editorial Committee Virtual Meeting Minutes Report

MEETING ON	FEBRUARY 2015, 2 nd - 11:00-12:00 CET		
MEETING CALLED BY	ISS		
TYPE OF MEETING	Scientific - Skype CALL		
CHAIR	Valentina POSSENTI		
NOTE TAKER	Valentina POSSENTI		
ATTENDEES	Alberto PERRA, Barbara DE MEI (ISS), Mira KOJOUHAROVA, Savina STOITSOVA, Anna KURCHATOVA (NCIPD); Mircea Ioan POPA (UMFCD); Donato GRECO (ZADIG)		
11:00 – 11:05	Introduction and approval of the agenda	PRESENTER	Valentina
11:05 – 11:45	Coordination of contents to be included in the first issue and distribution of assignments	PRESENTER	ALL
11:45 – 11:55	Stakeholders inventory	PRESENTER	ALL
11:55 – 12:00	Timeline and activities	PRESENTER	ALL

CONTENTS

<p>DISCUSSION</p> <p>The discussion has been based on all the materials that have been assembled and circulated within the Editorial Committee/Consortium both by post on the web CoP and by personal message via-platform (a tentative template is represented in the figure on the right)</p>	
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CONCLUSIONS

- A.** Pandemic Preparedness and Response is not a so called “hot issue” at the moment, so that it could be a good editorial solution to focus on how this issue is actually declined in the overall framework of the “Policy watch” (WP6). The call attendees discussed on the following ideas:
- A1** To do this, a good example could be represented by commenting the [EU Decision No 1082/2013/EU on serious cross-border threats to health and repealing Decision No 2119/98/EC](#).
- A2** Editorial Committee members indicated some contributions about (seasonal) flu and related vaccination coverage decrease. This topic can be entered not as reporting trends and epidemiological data, but as “case study” accordingly a risk communication perspective such as the approach presented by Pierluigi Lopalco (ECDC) at the TELL ME Final Conference that deals with [“When a bad communication campaign affect negatively vaccination campaigns”](#)
- A3** In light of his expertise (also as TELL ME Scientific Coordinator), Manfred Green (HU) could be asked about highlighting “what’s new” in the last [Pandemic Plan edited by Victorian CDC \(November 2014\)](#)



- B.** Even among the contributions given by Editorial Committee members, it is evident Ebola attracted the most attention both from an institutional viewpoint and in terms of public opinion. Inputs for this section could be:
- B1** Thus, it could be the referring topic in the section dedicated to WHO, that recently has published several aids, like “Ebola, one year later” and similar
- B2** Given the current few appeal of PPR, the analysis carried out by ECDC (http://www.ecdc.europa.eu/en/healthtopics/pandemic_preparedness/national_pandemic_preparedness_plans/Pages/national_pandemic_preparedness; http://www.ecdc.europa.eu/en/healthtopics/pandemic_preparedness/pandemic_2009_evaluations/Pages/pandemic_2009_evaluations.aspx) could be further improved and enriched (e.g. what’s going on in specific countries/geographic areas? To date, only Colleagues from Romania and Bulgaria described the situation in their own zones)
- C.** Given the expertise that ZADIG has achieved in TELL ME Project, we trust they may contribute on what’s new on the Social Network
- D.** Within the lower banner that deals with news from ASSET, a great relevance will be given to the work coming from WP2 highlighting how different patterns (gender, ethic, law, etc.) impact on PPR and have to be considered by policy-makers
- E.** In connection with the mandatory legacy TELL ME-ASSET to be exploited, it is planned to highlight the [TELL ME website](#) as relevant portal
- F.** Still, within the interface the two Projects, SnapShot (= a graphic hook to click on to get a verbal explanation) in the first Bulletin issue could represent the Outbreak Communication Framework Model elaborated in TELL ME

ACTION ITEMS	RESPONSIBLE	DEADLINE
Donato will comment the EU Disposition	ZADIG	February 13th
Mircea will write a comment on how communication might impact on vaccination trends	UMFCD	February 13th
Mircea is interested in exploiting the ECDC table concerning Pandemic Plans evaluation/modification	UMFCD	February 13th
Manfred is asked to comment on the most recent Pandemic Plan	HU	February 13th
ZADIG contributes in matter of PPR on Social Network	ZADIG	February 13th
ISS will provide WP2 tasks leaders (T2.1-T2.6) with a sort of template requiring key-items about presenting six identified patterns & PPR	ISS	February 3rd
WP2 tasks leaders are asked to answer key-questions about interweave of identified patterns with PPR	WP2 tasks leaders	February 13th

Stakeholders

DISCUSSION/ CONCLUSIONS	ACTION ITEMS	RESPONSIBLE	DEADLINE
As stated in its own evaluation chart, this task is constituted by two main activities: producing the Bulletin and disseminating it. Then, about creating a database of relevant stakeholders to be reached by the PPRB, we will start from an inventory carried out in TELL ME that each ASSET partner has to enrich with regard to the list of indicated institutional actors. Another important TELL ME Deliverable is: http://www.tellmeproject.eu/sites/default/files/137728362-D2-1-Stakeholder-Directory-and-Map-Website-Version-No-Directory.pdf			
	ISS will send the inventory carried out in TELL ME	ISS	February 3rd
	Each partner shall enrich the mailing list for PPRB	ALL	February 13th

Timeline

DISCUSSION/CONCLUSIONS	ACTION ITEMS	RESPONSIBLE	DEADLINE
After an editorial draft is set-up, it will be passed to ZADIG that is in charge to put the PPRB in a professional graphic layout and definitive editing. The (final or pre-final) version that will be ready by the Geneva meeting (February 24-25 th) will be presented.			
	To update the time schedule basing on how the work progresses on	ISS	February 13th



ANNEX II.e – Presentation of task 6.2 progress at TDW

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T6.2 Pandemic Preparedness and Response Bulletin

COORDINATION MEETING PART I:
SCIENTIFIC PROGRESS & EVALUATION & MANAGEMENT

Geneva, 24.02.2015

www.asset-scienceinsociety.eu

co-funded by the EU. GA: 612236

ASSET Action plan on Science in Society related issues in Epidemics and Total pandemics

Action plan on Science in Society related issues in Epidemics and Total pandemics

Objectives

- The ASSET-PPRB collects and disseminates information on policy...**
 - initiatives devoted to pandemics and related crisis management,
 - developments at local, national and European levels
- This Bulletin (a total of 7 issues, to be grouped in 3 Deliverables)**
 - considers and revises specific issues related to EU strategic priorities in pandemic preparedness, including communication and other responses
- It deals with**
 - general crisis management issues, such as Public Health Emergency Preparedness (PHEP),
 - Emergent Communicable Diseases,
 - updating of national pandemic plans and/or strategies in Europe, as well as statements, recommendations, etc.

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Action plan on Science in Society related issues in Epidemics and Total pandemics

Methods

- Core elements (already shared with the Editorial Committee, 11 members)**
 - Set up of rules and timing/general deadlines
 - Definition of hypothetical/eligible contents, structure and target
- Variable elements Producing 7 issues**
 - Allocating activities among Editorial Committee members according to their own role (task contributors, other elected members) by deadlines
 - Keeping in contact with Editorial Committee members both by tools available on the CoP web platform (Forums, Reserved messages, shared files and documents, calendar) and by ad hoc on line meetings, etc.
 - Gathering/Collecting highlights and relevant information in matter of Pandemic Preparedness & Response
 - Developing a comprehensive and consistent layout/format, without any content editing/elaboration
- Variable elements Disseminating 7 issues**
 - Sending out the issue of the Bulletin with a cover presentation letter to a mailing list of identified relevant stakeholders

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Action plan on Science in Society related issues in Epidemics and Total pandemics

Current progress (1st Issue) & Work for upcoming months

- The ASSET-PPRB contents according to the formula "What's new from the world..."**
 - ... of Pandemic Preparedness and Response
 - ... of Public Health Institutions
 - ... wide web in the field of PPR
 - ... of Social Networks
 - ... of ASSET
 - (What's new) with a SnapShot!
- The ASSET-PPRB format is**
 - in line with the template provided by Zedig within WP7 tools
 - downloadable from the ASSET website
 - a browsing .pdf including links to text contributions (brief)
 - a longer .pdf with all text contributions included (pamphlet)
- The ASSET-PPRB circulation/spreading**
 - Mailing list of addressees/targets (only Bulgarian Colleagues have updated inventory provided on CoP!)
 - Writing down the cover letter for sending out the Bulletin
 - Networking to increase the spreading of the Bulletin
 - Monitoring the spreading of the Bulletin

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Action plan on Science in Society related issues in Epidemics and Total pandemics

Thank you all for attention!

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ANNEX II.f – Intermediate version of the first PPRB Issue



newsletter_cov_w.jpg

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Pandemic Preparedness and Response Bulletin

Toward an Aware Stakeholder Community

Highlighting strategic priorities and policy-related initiatives on Pandemic Preparedness and Response, the ASSET Bulletin intends to be essential to a wide-ranged target: competent institutional actors and public health authorities, decision-makers, even on social networks.

ASSET Action plan on Science in Society related issues in Epidemics and Total pandemics

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The First Issue of ASSET Pandemic Preparedness and Response Bulletin | March 2015

Editorial

WELCOME TO READERS
An enjoyable experience of reading. To know more and plan action better

"Contemporary societies are constantly facing new challenges like achieving effective, equitable, sustainable and accessible health and social systems. In the field of communicable diseases, newly emerging infections address several crisis-related health issues ranging from effective preparedness and responses strategies to vaccine development. Beside game changing innovations in pharmaceuticals, vaccines and medical devices, key areas to be considered for for action and research concern deterioration of public trust in science and public health authorities and interventions (e.g. inadequate levels of vaccination coverage which leads to epidemics), and patient engagement in health governance (an essential component of a health and wellbeing agenda). Ad-hoc approaches are usually adopted dealing with single issues but failing to reckon with the bigger pictures and thus interdependency of variables (lack of holistic approaches). The ASSET Pandemic Preparedness and Response Bulletin is an updating tool on policy initiatives concerning pandemics and related crisis management, developed at local, national and international levels. This Bulletin (seven editions to be issued by December 2017) deals with the latest key health data, information and indicators in matter of Public Health Emergency Preparedness (PHEP), Emergent Communicable Diseases, revisions of national pandemic plans and/or strategies, as well as of relevant statements and recommendations in the field."

The "What's new from the world..." formula

A MATTER OF EDITORIAL CHOICES
Which columns are runned. Which contents are selected

- ✓ What's new from the world of Pandemic Preparedness and Response: a folder "case" including core issues such as Public Health Emergency Preparedness, Risk Communication, Laws
- ✓ What's new from the world of Public Health Institutions: major achievements by the most important institutions at international and national levels
- ✓ What's new from the world of Social Networks: insights circulated by the most used social media
- ✓ What's new from the world wide web in the field of Pandemic Preparedness and Response: each Bulletin Issue focuses on a website that is relevant in the field
- ✓ What's new from the world of ASSET : highlights from the ASSET Project
- ✓ What's new... with a SnapShot! an innovative concept represented by a graphic item

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What's new from the world of Pandemic Preparedness and Response

EU Decision 1082: a new challenge to increase population protection! (edited by [Donato Greco](#), Zadig)

When the gap intervenes in implementing policies

The EU Member States response capacity to health threats is still very uneven and inadequate to cope with cross border international health threats: two striking examples are recent responses to the H1N1 flu pandemic and to the Ebola alert. Given that the IHR WHO regulations implementation is ongoing but still far from a full application in several countries, the European Parliament and the European Council agreed to approve [DECISION No 1082/2013 on 22 October 2013 on serious cross-border threats to health and repealing Decision No 2119/98/EC](#). The Commission shall submit a report on the implementation of this Decision to the European Parliament and the Council by 7 November 2015, and every three years thereafter. An Health Security Committee (HSC), composed by representatives from the Member States, is hereby established as technical body: a former HSC was already existing and revealed to be instrumental in setting up this decision. Anyway, it stood for an "informal body" while the actual committee took well defined and wide ranged tasks in coordinating and supporting the European Commission.

Public health measures in relation to several categories of serious cross-border threats to health are recalled by this Decision making clear enough that its application field goes over simply the communicable diseases area, up to unknown origin then including man made attacks (art. 2, par. 1 and 2)

- ✓ threats of biological (communicable diseases, antimicrobial resistance and healthcare-associated infections related to communicable diseases, biotoxins or other harmful biological agents not related to communicable diseases) or chemical or environmental or unknown origin;
- ✓ events which may constitute public health emergencies of international concern under the IHR, provided that they fall under one of the categories of threats set out in points listed above;
- ✓ epidemiological surveillance of communicable diseases and of related special health issues.

The other innovative aspect of this directive is definitively the recognition of risk communication as one essential tool in coping with health threats (par. 22 of considerations). Countries are in fact requested to include appropriate risk communication strategies into the mandatory annual health response and preparedness plan. Moreover, at art. 11 par. b, coordination of risk and crisis communication to be adapted to Member State needs and circumstances aimed at providing consistent and coordinated information in the European Union to the public and to healthcare professionals is requested in the Coordination and response at EU level. Put in practice de facto only on October 2014, this directive gives appropriate space for implementing products both from [TELMÉ](#) and [ASSET](#) 7FP projects: availability of scientifically constructs of risk communication strategies and appropriated tested toll for best effective communication offer a relevant challenge to all national authorities, but also to the researchers engaged in working on ASSET project.

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What's new from the world of Pandemic Preparedness and Response

DANGEROUS RELATIONSHIPS (based on a Pier Luigi Lopalco's [presentation](#) - edited by [Mircea Ioan Popa](#), UMFCD)

How bad communication can destroy a well-planned vaccination programme

About Pandemics, useful information can be found on the [WHO](#) website: current definitions, preparedness phases, confirmation methods. WHO identifies an epidemic as "the occurrence of more disease cases than usual" while influenza pandemic is defined as "an epidemic expanding throughout the entire globe". That is very easily accomplished today because of a highly interconnected world by travelling. However, pandemics can be mild or severe in the disease and the number of deaths that they cause. Identifying the current pandemic phase is applied by certain criteria, such as the viral transmission modes, whether it is a reassuring virus or if outbreaks are reported in another country from the WHO Region.

"Among crucial aspects to be recognized within pandemic preparedness and response, risk communication plays a primary role. Where information must always hold a base of evidence, communication has also to be timely and unambiguous, developed according to a participatory approach. In this perspective, expected decisions are scientifically grounded and reliable." To further outline the delicate and difficult relationship between communication and vaccination, two case histories are reported below. Vaccination programs must take into account safety and effectiveness issues, but should also manage side effects and deaths wrongly attributed to vaccine uptake (quite frequently circulating on the Internet or by media).

HPV vaccination has raised many pros, but especially many opinions against immunization. This was partially due both to lack of information and to poor communication. During vaccination campaigns, several deaths were reported in young immunized girls. The most were erroneously related to HPV vaccination, without accounting comorbidities and the real cause of death. No scientific demonstration – but sustained reactions in the community, without a clear and useful explanation from health authorities (from case to case). An example showing to what extent lacking communication can let a vaccination program fail is the case of a 14-year-old girl who died shortly after being vaccinated against HPV. The news was published on "The Guardian", suggesting a causal relationship between the events. Although two days later another article explaining the girl had a thorax tumour was issued, the first news eventually had a stronger influence on the readers.

To ensure a good health risk communication, messages should be based on evidence. In November 2014, the flu vaccine Fludac, commonly used in elderly with co-morbidities, was accused to have killed three people in Italy. Some regional vaccination campaigns were stopped, several batches of vaccine were withdrawn. The story was picked up by newspaper – for instance, a syringe on a front page photo titling "Lethal injection" – pretty amplifying population fear for vaccination. Official reports by the Italian drug agency did not find any causal relationship between Fludac vaccine uptake and the three deaths. Basing on 12 reports from six Regions, where six batches of flu vaccine (about 1.3 million doses) were used, 1,369 deaths per day were estimated in population aged over-65. Assuming a 10% use of Fludac and 10% of deaths were reported, 13 deaths per day were estimated whereas only 12 cases were overall reported in 22 days. Relatively few adverse reactions

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What's new from the world of Pandemic Preparedness and Response

Assessment of human influenza pandemic scenarios in Europe A literature review and parameters to define how severity profiles may develop

The response to the emergence of the 2009 influenza A(H1N1) pandemic was the result of a decade of pandemic planning, largely centred on the threat of an avian influenza A(H5N1) pandemic. Based on a literature review, this study aims to define a set of new pandemic scenarios that could be used in case of a future influenza pandemic. A total of 338 documents were identified using a searching strategy based on seven combinations of keywords. Eighty-three of these documents provided useful information on the 13 virus-related and health-system-related parameters initially considered for describing scenarios. Among these, four parameters were finally selected (clinical attack rate, case fatality rate, hospital admission rate, and intensive care admission rate) and four different levels of severity for each of them were set. The definition of six most likely scenarios results from the combination of four different levels of severity of the four final parameters (256 possible scenarios). Although it has some limitations, this approach allows for more flexible scenarios and hence it is far from the classic scenarios structure used for pandemic plans until 2009.

About Preparedness and Response to Communicable Diseases in the world From Eastern Europe

Bulgaria: [Ebola preparedness](#) nationwide and preliminary results coming out from a pilot project titled "Attitude towards Vaccination: Different Points of View", developed by the University of Sofia.

Romania: dealing with the public health importance of [influenza](#) and related vaccination issue (with a specific focus on special groups of people)

From Asian continent

India: a [H1N1 outbreak](#) is currently occurring in the subcontinent and has provoked almost 800 deaths and quite 13,000 contagiouses within the first two months of 2015 (January 1st - February 21st).

From Australia

Victoria State: the latest [health management plan for pandemic influenza](#) comes from Melbourne, Communicable Disease - Health Prevention and Control Department (November 2014).

From America

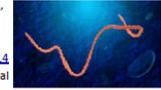
USA: the measles outbreak continuing to spread - with 121 cases confirmed in 17 states as of February 2015, 9th - poses as a quite great [communication case](#) about vaccine-preventable diseases.



What's new from the world of Public Health Institutions

Ebola outbreak one year later: the WHO evaluation In-depth analysis papers trace virus' spread and containment efforts

One year after the first [Ebola Virus Disease \(EVD\)](#) cases emerged in West Africa, the outbreak's continued deadly toll has led the World Health Organization (WHO) to explore the crisis in-depth in a series of papers that trace the virus' spread and WHO's response, the organization announced in a [statement](#). The [14 papers](#) and [interactive map](#) outline key events in the Ebola outbreak with special attention paid to hard-hit Guinea, Liberia and Sierra Leone. They also detail factors that led to successful containment in other African countries such as Senegal and Mali, and contrast these with the factors that caused traditional outbreak control measures to fail in other regions. The final paper, titled "What needs to happen in 2015," evaluates lessons learned from the past year to make recommendations for countries in their continuing efforts to bring the outbreak under control. If there's one thing Ebola specialists have learned since the start of the outbreak, however, it's that predictions about the virus are maddeningly unreliable. Still, the Liberian government is confident in its prediction that the West African country could be free of the virus by the end of February, with only 10 confirmed cases remaining as of January 12, Reuters [reported](#). Liberia was one of the hardest-hit countries, accounting for more than 3,500 of the total 8,400 killed, according to WHO. The worldwide community may be tempted to become complacent as the number of cases has started to decline, but must not rest until there are zero cases of Ebola. As well we must not rest until the health system in Liberia and in West Africa is strong enough to contain the next outbreak, whether it be of Ebola or some other threat.



About Pandemic Preparedness and Response according to ECDC Pandemic Plans and Evaluations have not been updated recently in Europe

After the 2009 pandemic, many countries and international bodies have been undertaking evaluations or even formal enquiries to assess how well their plans and preparations worked against the particular features within pandemic evolution. ECDC is aware of at least 16 international and multinational evaluations that are underway and are relevant to European countries. Some are general but many more relate to specialist areas like vaccination, surveillance or communications. There are also many national evaluations and lessons learnt exercises. Influenza pandemic preparedness [plans](#) are available per country and a useful [table](#) is provided as well, where ECDC lists and describes the known evaluations and that have published a report (interim or final) or have announced some initial details. The template includes international reports first followed by country specific reports from European countries organised alphabetically. Other tools are foreseen: [assessment charts](#), [ECD comments](#), [summaries](#). A [brief summary](#) describes the Assessment Report on the EU-wide Response to Pandemic (H1N1) 2009



What's new from the world of Social Networks (edited by Michele Bellone, Zadig)

Along with epidemiological and biological analysis, tapping into online sentiment and behaviour displayed on social networks is now a powerful tool to predict how the public responds during infectious disease outbreaks, further improving the efficacy of evidence-based communication strategies. As [highlighted by experts of the TELL ME project](#), being present on media – especially on social media – long before the emergence of a crisis is one very important way for health institutions and authorities to build trust, which in turn is a key element in any kind of communication, at any degree. By doing this, it would be possible to take advantage of quickness and immediacy held by social media in spreading information.

In the Ebola case, many people in the regions struck by the virus started using social media in order to share information about the disease and its prevention. Hashtags like [#EbolaFacts](#) became trending topics, and were also shared by local celebrities. The high utilisation of mobile phones in West Africa strengthens the effect of these campaigns, thus allowing to offer proper information about infection avoidance. However, the most rural areas in Guinea, Liberia, and Sierra Leone are not online, that means higher-risk people are also hard to reach groups.

Furthermore, data gathered through social networks could play a significant role in keeping an incisive level of surveillance on communicable disease outbreaks. An outstanding example comes from the [work](#) of Patty Kostkova, Senior Research Fellow and Head of City e-health Research Centre (CeRC) at City University in London. In 2011, her team analysed three million tweets during the 2009 swine flu outbreak, looking for the word "flu". They compared them with the number of actual cases reported by

the Royal College of General Practitioners (RCGP) – the professional membership body for family doctors in the UK – finding that the Twitter discussion, once cleaned the noise that is part of it, could actually predict the pandemic up to a week before the official surveillance. However, to properly communicate by social media, especially in case of epidemics or pandemics, it has to be minded that those features making them an extremely useful communication tool in case of emergencies represent a potential risk, too. Health organizations cannot control all information available on the web, whilst the way science works – with prudence, without drawing hasty conclusion and avoiding potentially dangerous oversimplification – can easily come into conflict with rapidity and shortness of many online messages. Few quick lines may not be able to display the complexity of situation involving many different factors, from scientific data to human behaviour, from cultural practices to political constraints.

Nevertheless, given the availability of proper information to fact-checkers, spontaneous reactions by social media users may counter the spread of misinformation online, even within hours. This is the conclusion of [a study](#) that used the riots occurred in Birmingham in August 2011, and the relative diffusion of misinformation on Twitter, as a model for the dynamics behind the spread of false rumours. When dealing with social networks in case of health emergencies such as epidemics or pandemics, knowing both sides of the coin is crucial for all actors involved in health risk communication and management. Health authorities and institutions should plan their online communication carefully and way before an outbreak starts, in order to really improve their communicative efforts and, as a consequence, their efficacy in saving lives.



What's new from the world wide web in the field of Pandemic Preparedness and Response

TELL ME Project Transparent communication in Epidemics: Learning Lessons from experience, delivering effective Messages, providing Evidence

Some [TELL ME](#) Project (Feb 2012- Jan 2015) products are: a new Pandemic Integrated Threat Index, a Communication Model, a Practical Guide for Health Risk Communication, Primary Care Online Courses, a Social Simulation Model.



What's new from the world of ASSET

THE FIRST YEAR OF ASSET PROJECT AT A GLANCE!

Several activities have started and are ongoing, something is already out

Several issues can be highlighted from the workgroup on "Study and Analysis". About Pandemics and Epidemics, the following items have been outlined: [governance](#); [unsolved scientific questions](#); [crisis participatory governance](#); ethics, law and rights; [gender pattern](#); [intentionally caused outbreaks](#). In the field of "Policy Watch" the High Level Policy Forum has been activated ([leaflet](#), [brief summary](#)).

What's new... with a Snapshot!

The graphic concept at the First PPRB Issue



The graphical representation of the [new framework model](#) for risk communication in case of pandemic, developed in TELLMÉ, shows that the Public Sphere, with all its segmentation, should be at the centre of the Outbreak Communication. The public, as all stakeholders as well, must be partners, not a target to aim at. Social actors include: civil society, politicians, institutions, private sector. Other key issues are: mass and social media, opinion leaders, formative evaluation. Additional elements intervene as well, such as two-way communication, ethics, empowerment, perceived risk, transparency, trust.



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ANNEX III – The first ASSET-PPRB Issue effectively released

ASSET
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ASSET Pandemic Preparedness and Response Bulletin
“Share and move”

Issue 1, April 2015


co-funded by the EU. GA: 612236

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ASSET Action plan on Science in Society related issues in Epidemics and Total pandemics



Highlighting strategic priorities and policy-related initiatives on Pandemic Preparedness and Response, the “Share and Move” ASSET Bulletin intends to be essential to a wide-ranged target: competent institutional actors and public health authorities, decision-makers, even on social networks.

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Editorial

WELCOME TO READERS

An enjoyable experience of reading. To know more and plan action better

Contemporary societies are constantly facing new challenges like achieving effective, equitable, sustainable and accessible health and social systems. In the field of communicable diseases, newly emerging infections address several crisis-related health issues ranging from effective preparedness and responses strategies to vaccine development.

Beside changing innovations in pharmaceuticals, vaccines and medical devices, key areas to be considered for action and research concern deterioration of public trust both in science and in public health. Failures in interventions, like inadequate levels of vaccination coverage leading to epidemics, are under scrutiny and patient engagement in health governance is an essential component of a health and wellbeing agenda. Ad-hoc approaches are usually adopted to deal with single issues, but they fail to reckon with bigger pictures and, overall holistic strategies and thus interdependency of variables are lacking.

ASSET (Action plan on Science in Society related issues in Epidemics and Total pandemics) is a four-year Mobilisation and Mutual Learning Action Plan (MMLAP), started in January 2014 aimed at forging a partnership with complementary perspectives, knowledge and experiences. Scientific and societal challenges raised by pandemics and associated crisis management will be addressed, with the aim of exploring and mapping Science in Society (SiS) related issues in global pandemics. The final goal is to define and test participatory and inclusive strategies, in order to identify the necessary resources to make the action sustainable after the project completion.

The ASSET Pandemic Preparedness and Response Bulletin "Share and move" is an updating tool on policy initiatives concerning pandemics and related crisis management, developed at local, national and international levels. This Bulletin - seven editions to be issued by December 2017 - deals with the latest key health data, information and indicators in matter of Public Health Emergency Preparedness (PHEP), Emergent Communicable Diseases, revisions of national pandemic plans and/or strategies, as well as of relevant statements and recommendations in the field.

A matter of editorial choices To better understand which columns are runned and the sort of contents that is selected, the "What's new from the world..." formula has been adopted and implemented. News from the world of Pandemic Preparedness and Response are reported in a main section that can be seen as a folder "case" including core issues such as PHEP, risk communication, laws. Major achievements by the most important international public health institutions are described as well as highlights and insights circulated by the most used social media. The Bulletin shows also a relevant website in the field, news from the ASSET project and a "snapshot", standing for an innovative concept represented by a graphic item.





What's new from the world of Pandemic Preparedness and Response

EU Decision 1082: a challenge to increase population protection! (Donato Greco)

When the gap intervenes in implementing policies

The EU Member States response capacity to health threats is still very uneven and inadequate to cope with cross border international health threats: two striking examples are the recent responses to the H1N1 flu pandemic and to the Ebola alert. Given that the IHR WHO regulations implementation is ongoing but still far from a full application in several countries, the European Parliament and the European Council agreed to approve [DECISION No 1082/2013 on 22 October 2013 on serious cross-border threats to health and repealing Decision No 2119/98/EC](#). The Commission shall submit a report on the implementation of this Decision to the European Parliament and the Council by 7 November 2015, and every three years thereafter.

A Health Security Committee (HSC), composed by Member States representatives, is hereby established as technical body: a former HSC was already existing and revealed to be instrumental in setting up this decision. Anyway, it stood for an "informal body" while the actual committee took well defined and wide ranged tasks in coordinating and supporting the European Commission.

The other innovative aspect of this directive is definitively the recognition of risk communication as one essential tool in coping with health threats (par. 22 of considerations). Countries are in fact requested to include appropriate risk communication strategies into the mandatory annual health response and preparedness plan. Moreover, at art. 11 par. b, coordination of risk and crisis communication at EU level, to be adapted to Member State needs and circumstances, aims at providing consistent and

Public health measures in relation to several categories of serious cross-border threats to health are recalled by this Decision making clear enough that its application field goes over simply the communicable diseases area, up to unknown origin then including man made attacks (art. 2, par. 1 and 2)

- ✓ threats of biological (communicable diseases, antimicrobial resistance and healthcare-associated infections related to communicable diseases, biotoxins or other harmful biological agents not related to communicable diseases) or chemical or environmental or unknown origin;
- ✓ events which may constitute public health emergencies of international concern under the IHR, provided that they fall under one of the categories of threats set out in points listed above;
- ✓ epidemiological surveillance of communicable diseases and of related special health issues.

coordinated information in the European Union to the public help the healthcare professionals. Put in practice de facto only on October 2014, this directive gives appropriate space for implementing products both from [TELLME](#) and [ASSET](#) 7FP projects: scientifically based risk communication strategies and appropriated tested tools for best effective communication, offer a relevant challenge to all national authorities, but also to the researchers engaged in working on ASSET project.





What's new from the world of Pandemic Preparedness and Response

Dangerous relationships (Mircea Ioan Popa)

How bad communication can destroy a well-planned vaccination programme

[World Health Organization \(WHO\)](#) website provides practical information on pandemics: current definitions, preparedness phases, confirmation methods. An **epidemic** is identified as "the occurrence of more disease cases than usual", **influenza pandemic** is defined as "an epidemic expanding throughout the entire globe". That is very easily accomplished today because of a highly interconnected world by travelling. Pandemics can be mild or severe in the disease and the number of deaths that they cause. Identifying the current pandemic phase is applied by certain criteria, such as the viral transmission modes, whether it is a reasserting virus or if outbreaks are reported in another country from the WHO Region.

"Among crucial aspects of pandemic preparedness and response, risk communication plays a primary role. Whether information must always hold a base of evidence, communication has also to be timely and unambiguous, developed according to a participatory approach. In this perspective, expected decisions are scientifically grounded and reliable".

Vaccination programs must account safety and effectiveness issues, but should also manage side effects and deaths wrongly attributed to vaccine uptake (quite frequently circulating on the Internet or by media). To further outline the delicate and difficult relationship between communication and vaccination, two case histories are reported.

HPV vaccination has raised many pros, but especially many opinions against immunization. This was partially due both to lack of information and to poor communication.

During vaccination campaigns, several deaths were reported in young immunized girls. The most were erroneously related to HPV vaccination, without accounting comorbidities and the real cause of death. No scientific demonstration – but sustained reactions in the community, without a clear and useful explanation from health authorities (from case to case). An example showing to what extent lacking communication can let a vaccination program fail is the case of a 14-year-old girl who died shortly after being vaccinated against HPV. The news was published on "The Guardian", suggesting a causal relationship between the events. Although two days later another article explaining the girl had a thorax tumour was issued, the first news definitively had a stronger influence on the readers.

A good health risk communication, messages is ensured by evidence. In November 2014, the flu vaccine Fluvad, commonly used in elderly with comorbidities, was accused to have killed three people in Italy. Some regional vaccination campaigns were stopped, several batches of vaccine were withdrawn. The story was picked up by newspapers – for instance, a syringe on a front page photo titling "Lethal injection" – pretty amplifying population fear for vaccination. Official reports by the Italian Drug Agency did not find any causal relationship between Fluvad vaccine uptake and the three deaths. Basing on 12 reports from six Regions, where six batches of flu vaccine (about 1.3 million doses) were used, 1,369 deaths per day were estimated in population aged over-65. Assuming a 10% use of Fluvad and 10% of deaths were reported, 13 deaths per day were estimated whereas only 12 cases were overall reported in 22 days, relatively few adverse reactions.

Article based on a [presentation](#) by Pier Luigi Lapalca (ECDC)





What's new from the world of Pandemic Preparedness and Response

Assessment of human influenza pandemic scenarios in Europe

A literature review and parameters to define how severity profiles may develop

The response to the emergence of the 2009 influenza A(H1N1) pandemic was the result of a decade of pandemic planning, largely centred on the threat of an avian influenza A(H5N1) pandemic. Based on a literature review, this [study](#) aims at defining a set of new pandemic scenarios that could be used in case of a future influenza pandemic. A total of 338 documents were identified using a searching strategy based on seven combinations of keywords. Eighty-three of these documents provided useful information on the 13 virus-related and health-system-related parameters initially

considered for describing scenarios. Among these, four parameters were finally selected (clinical attack rate, case fatality rate, hospital admission rate, and intensive care admission rate) and four different levels of severity for each of them were set. The definition of the six most likely scenarios results from the combination of four different levels of severity of the four final parameters (256 possible scenarios). Although it has some limitations, this approach allows for more flexible scenarios and hence it is far from the classic scenarios structure used for pandemic plans until 2009.

About Preparedness and Response to Communicable Diseases in the world

From Eastern Europe

Bulgaria A pilot project titled *"Attitude towards Vaccination: Different Points of View"* is being developed by the [University of Sofia, Department of Sociology](#).

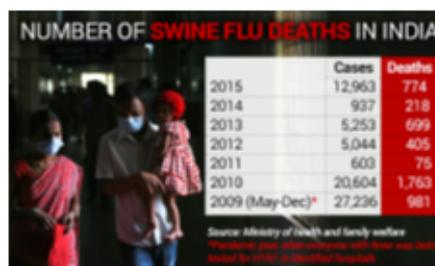
Romania Public health importance of influenza and related vaccination issue is the focus of an [article](#) by [Alexandrescu V.](#) in *Infectio.ro*. 2014;40(4):6-9.

From America

USA The [measles outbreak](#) continuing to spread – with 146 cases confirmed in 7 states as from December 28th to March 27th, 2015 – stands not only as an epidemiological case study but also as a quite great communication example about vaccine-preventable diseases.

From Asian continent

India The current [H1N1 outbreak](#) in the subcontinent has provoked almost 800 deaths and quite 13,000 contagious between January 1st and February 21st.



From Australia

Victoria State The latest [health management plan for pandemic influenza](#) came out in Melbourne.



What's new from the world of Public Health Institutions

Ebola outbreak one year later: the WHO evaluation

In-depth analysis papers trace virus' spread and containment efforts

One year after the first [Ebola Virus Disease \(EVD\)](#) cases emerged in West Africa, the outbreak's continued deadly toll has led the World Health Organization (WHO) to explore the crisis in-depth in a series of papers that trace the virus' spread and WHO's response, the organization announced in a [statement](#). The [14 papers](#) and [interactive map](#) outline key events in the Ebola outbreak with special attention paid to hard-hit Guinea, Liberia and Sierra Leone. They also detail factors that led to successful containment in other African countries such as Senegal and Mali, and contrast these with the factors that caused traditional outbreak control measures to fail in other regions. The final paper, titled "What needs to happen in 2015," evaluates lessons learned from the past year to make recommendations for countries in their continuing efforts to bring the outbreak under control. If there is one thing Ebola specialists have learned since the start of the outbreak, however, is that predictions about the virus are maddeningly unreliable.



Still, the Liberian government is confident in its prediction that the West African country could be free of the virus by the end of February, with only 10 confirmed cases remaining as of January 12, Reuters [reported](#). Liberia was one of the hardest-hit countries, accounting for more than 3,500 of the total 8,400 killed, according to WHO. The worldwide community may be tempted to become complacent as the number of cases has started to decline, but must not rest until there are zero cases of Ebola. As well we must not rest until the health system in Liberia and in West Africa is strong enough to contain the next outbreak, whether it be of Ebola or some other threats.

About Pandemic Preparedness and Response according to ECDC

Pandemic Plans and Evaluations have not been updated recently in Europe

Lessons learnt exercises After the 2009 pandemic, many countries and international bodies have been undertaking evaluations or even formal enquiries to assess how well their plans and preparations worked against the particular features within pandemic evolution. ECDC is aware of at least 16 international/

multinational evaluations that are underway and are relevant to European countries. Influenza pandemic preparedness [plans](#) are available per country and a [table](#) lists known evaluations and published report (interim or final). Other tools are provided: [assessment charts](#), [ECD comments](#), [summaries](#).





What's new from the world of Social Networks (Michele Bellone)

Tapping into online sentiment and behaviour displayed on social networks, along with epidemiological and biological analysis, is now a powerful tool to predict how the public responds during infectious disease outbreaks, further improving the efficacy of evidence-based communication strategies. As [highlighted by experts of the TELL ME project](#), being present on media – especially on social media – long before the emergence of a crisis is one very important way for health institutions and authorities to build trust, which in turn is a key element in any kind of communication, at any degree. By doing this, it would be possible to take advantage of quickness and immediacy held by social media in spreading information.

In the Ebola case, many people in the regions struck by the virus started using social media in order to share information about the disease and its prevention. Hashtags like [#EbolaFacts](#) became trending topics, and were also shared by local celebrities. The high utilisation of mobile phones in West Africa strengthens the effect of these campaigns, thus allowing to offer proper information about infection avoidance. However, the most rural areas in Guinea, Liberia, and Sierra Leone are not online, that means higher-risk people are also hard to reach.

Data gathered through social networks could play a significant role in keeping an incisive level of surveillance on communicable disease outbreaks. An outstanding example comes from the [work](#) of Patty Kostkova, Senior Research Fellow and Head of City e-health Research Centre (CeRC) at City University in London. In 2011, her team analysed three million tweets during the 2009 swine flu outbreak, looking for the word “flu”. They compared them with the

number of actual cases reported by the Royal College of General Practitioners (RCGP) – the professional membership body for family doctors in the UK – finding that the Twitter discussion, once cleaned the noise that is part of it, could actually predict the pandemic up to a week before the official surveillance. However, to properly communicate by social media, especially in case of epidemics or pandemics, it has to be minded that those features making them an extremely useful communication tool in case of emergencies represent a potential risk, too. Health organizations cannot control all information available on the web, whilst the way science works – with prudence, without drawing hasty conclusion and avoiding potentially dangerous oversimplification – can easily come into conflict with rapidity and shortness of many online messages. Few quick lines may not be able to display the complexity of situation involving many different factors, from scientific data to human behaviour, from cultural practices to political constraints.

Spontaneous reactions by social media users may counter the spread of misinformation online, even within hours, nevertheless, given the availability of proper information to fact-checkers. This is the conclusion of [a study](#) that used the riots occurred in Birmingham in August 2011, and the relative diffusion of misinformation on Twitter, as a model for the dynamics behind the spread of false rumours. When dealing with social networks in case of health emergencies such as epidemics or pandemics, knowing both sides of the coin is crucial for all actors involved in health risk communication and management. Health authorities and institutions should plan their online communication carefully and way before an outbreak starts, in order to really improve their communicative efforts and, as a consequence, their efficacy in saving lives.





What's new from the world wide web in Pandemic Preparedness and Response

TELL ME Project **Transparent communication in Epidemics: Learning Lessons from experience, delivering effective Messages, providing Evidence**

Some products generated within the EU-funded project [TELL ME](#) (February 2012-January 2015) are: a new Pandemic Integrated Threat Index, a Communication Model, a Practical Guide for Health Risk Communication, Primary Care Online Courses, a Social Simulation Model.



What's new from the world of ASSET First year of ASSET project at a glance! Several activities have started and are ongoing, something is already out

Several issues can be highlighted from the workgroup on "[Study and Analysis](#)". About Pandemics and Epidemics, the following items have been outlined: governance; unsolved scientific questions; crisis participatory governance; ethics, law and rights; gender pattern; intentionally caused outbreaks.

In the field of "[Policy Watch](#)" the High Level Policy Forum has been activated ([a brief presentation](#)). The first [meeting](#) has been held in Brussels on March 2015, 12th. Within the "[Dialogue and Participation](#)" activities, a functional Glossary of terms for Capacity Building is about to be released.

What's new... with a SnapShot!



The graphic concept at the First PPRB Issue

Within the outputs developed by TELL ME project, the graphical representation of the new framework model for risk communication in case of pandemic shows that the Public Sphere, with all its segmentation, should be at the centre of the Outbreak Communication. The public, as all stakeholders as well, must be partners, not a target to aim at. Social actors include: civil society, politicians, institutions, private sector. Other key issues are: mass and social media, opinion leaders, formative evaluation. Additional elements intervene as well, such as two-way communication, ethics, empowerment, perceived risk, transparency, trust.





Disclaimer

The ASSET project was designed to accomplish a European Commission Call (DG Research and Innovation - HEALTH), for developing a Mobilization and Mutual Learning Action Plan in response to epidemics and pandemics with regard to Science in Society related issues.

The European grant agreement ensures scientific and editorial freedom to the ASSET consortium partners.

The views expressed in the ASSET Pandemic Preparedness and Response Bulletin "*Share and move*" are those of the authors and may not necessarily comply with European policy.

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In case of conflict of interests, it is declared.

Readers are advised to verify any information they choose to rely on.

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Acknowledgements

Caterina Rizzo, Antonella Lattanzi, Lorenzo Fantozzi (Istituto Superiore di Sanità, Italy); [ASSET consortium partners](#).

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