Managing public concerns

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• As of 12 May 2011, more than 10,000 cases of measles and four deaths have been reported from 18 European Union/European Economic Area countries [1]

• France has reported the largest number of cases in 2011. As of 19 April, over 7,500 cases were reported in the first three months of the year [2]


Understand - where do the concerns come from?

- social change
- suspicion of institutions
- rejection of ‘modern’ medicine
- history
- science?
- media influence
- pressure groups
- success of the programme
- concerns about safety
"The Cow-Pock or the wonderful effects of the new inoculation". James Gillray, 1802
The vaccination monster London, 1807
http://archive.mail-list.com/hbv_research/msg03897.html
Ban three-in-one jab urge doctors after new fears

Measles jab fear grows amid drug shortage

A jab in the dark for our babies

Media headlines 1998
MMR doctor struck off register

By Nick Triggle
Health reporter, BBC News

The doctor who first suggested a link between MMR vaccinations and autism has been struck off the medical register.

The General Medical Council found Dr Andrew Wakefield guilty of serious professional misconduct over the way he carried out his controversial research.

It follows a GMC ruling earlier this year that he had acted unethically.

Dr Andrew Wakefield's 1998 Lancet study caused vaccination rates to plummet, resulting in a rise in measles – but the findings were later

SEE ALSO

Q&A: The MMR debate
27 Mar 08 | Health

The story that will not go away
29 Jan 10 | Health

MMR research timeline
04 Feb 08 | Health

Profile: Dr Andrew Wakefield
27 Jan 10 | Health

MMR doctor 'broke research rules'
28 Jan 10 | Health

Measles 'surge' prompts warning
30 Aug 07 | Health

MMR scare: doctor 'paid children'
16 Jul 07 | Health

'No link' between MMR and autism
03 Mar 05 | Health

immunisation
Swine flu displaced MMR as the key concern

• In 2010 swine flu was the greatest concern for parents
  • high levels of publicity recalled – displacing MMR
  • seen as less safe than other immunisations

• Scare stories about MMR have receded and MMR is now seen as being as safe as other childhood immunisations
How to combat some of these problems - listen to your audience
Base understanding and approaches on research
Are immunisations safe?

The swine flu vaccine is the main concern for parents now, with MMR on a par with others in terms of perceived safety.

<table>
<thead>
<tr>
<th>Immunisation</th>
<th>Slight risk</th>
<th>Completely safe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-school booster</td>
<td>58%</td>
<td>42%</td>
</tr>
<tr>
<td>2nd dose MMR</td>
<td>48%</td>
<td>52%</td>
</tr>
<tr>
<td>5 in 1 vaccine</td>
<td>51%</td>
<td>49%</td>
</tr>
<tr>
<td>Seasonal flu</td>
<td>52%</td>
<td>48%</td>
</tr>
<tr>
<td>TB</td>
<td>52%</td>
<td>48%</td>
</tr>
<tr>
<td>Men C</td>
<td>51%</td>
<td>49%</td>
</tr>
<tr>
<td>MMR</td>
<td>46%</td>
<td>54%</td>
</tr>
<tr>
<td>Pneumo</td>
<td>46%</td>
<td>54%</td>
</tr>
<tr>
<td>Hib/Men C</td>
<td>49%</td>
<td>51%</td>
</tr>
<tr>
<td>Swine flu</td>
<td>29%</td>
<td>71%</td>
</tr>
</tbody>
</table>

Base: 2010 - parents of 0-4s (1730)
Most parents discussed 0-2s immunisations with a HP, but less so for 3-4s. HV in particular much less used by parents of 3-4s.

Who do parents talk to?

- Any
- HV
- GP
- PN
- Midwife

Base: Parents of 0-2s - 2010 (1142), previous years c.1000
Who do parents trust?

Health professionals and the NHS remain the most trusted sources of advice on immunisation. Parents recognise that family and friends may not give them the most accurate information.

<table>
<thead>
<tr>
<th>Source</th>
<th>Strongly agree</th>
<th>Slightly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>GP, HV or PN</td>
<td>54%</td>
<td>92%</td>
</tr>
<tr>
<td>NHS</td>
<td>42%</td>
<td>86%</td>
</tr>
<tr>
<td>Pharmacist</td>
<td>19%</td>
<td>66%</td>
</tr>
<tr>
<td>Government</td>
<td>18%</td>
<td>58%</td>
</tr>
<tr>
<td>Family/friends</td>
<td>14%</td>
<td>49%</td>
</tr>
<tr>
<td>Media</td>
<td>4%</td>
<td>21%</td>
</tr>
</tbody>
</table>

Base: 2010 - parents of 0-4s (1730)
Attitudes towards flu vaccination

- Occupational health managers reported four key reasons why staff were not taking up the flu vaccination:
  - Staff believing they are healthy and not at risk
  - Flu not seen as a serious illness, even if contracted
  - Doubt about the efficacy of the flu immunisation
  - A concern that the flu vaccination will give people flu
What do parents want?

• clarity

• consistency

• facts

• openness

• range of information and resources
Cervical cancer jabs for pre-teen girls could save 400 lives a year

> £100m programme aimed at 12-year-olds
> Vaccine needed before onset of sexual activity

By EMBRY CONCERNS
Health Correspondent

Michelle Vinall knows the devastating impact of cervical cancer after surgery two years ago. The teaching assistant is starting to rebuild her life but is adamant daughter Francesca, 10, will never have to go through the same.

Sex jab for girls

Girls as young as 12 will be vaccinated against the virus that causes cervical cancer. The vaccine is expected to offer at least 90 per cent protection against cancerous changes in the cervix and reduce the risk of cervical cancer by 70 per cent.

Cervical cancer vaccine ‘will encourage girls to be more promiscuous’

By Alex Neison

CONCERNS are mounting among family groups over the vaccination of schoolgirls against the virus that causes cervical cancer, with fears it may lead to increased sexual promiscuity and may not be effective in the long term.

The jab will protect against the human papilloma virus (HPV), which is a sexually transmitted disease that accounts for 70 per cent of cervical cancer cases.

Daily Mirror

Daily Telegraph

Daily Star
Arm against cervical cancer

immunisation
Attitudes towards vaccination

• parents of 8 – 10 year old children (2005)
• parents of 11 – 12 year old girls (2007)
• 11 – 12 year girls (2007)
• health professionals (2007)
• ongoing developmental work (e.g. advertising)
• pre-testing
• evaluation
But . . . expect the unexpected

• most girls didn’t know where their cervix was, and wherever it was, they certainly didn’t want the injection there! (The campaign strapline ‘arm against cervical cancer’ went a long way towards allaying this fear).

• you can include too much information in a leaflet. Keep it short and clear. Use other platforms for more detailed information such a factsheet, Q&A and website.

• layout and design of materials can make a big difference; we tested two leaflets with same text but different layout – some girls thought the content was different.
Beating cervical cancer
The essential guide to the HPV vaccination for girls aged 12 and 13

It's a girl thing!
Get your jab today to reduce the risk of cancer later in life.

Beating cervical cancer
All you need to know about the HPV vaccination
Leaflet

About fitness

All you need to know about the new HPV vaccine that protects against the commonest causes of cervical cancer

Beating cervical cancer

A guide to the HPV vaccination for girls aged 12 to 13

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A guide to the HPV vaccination for girls aged 12 to 13
Branded HPV vaccine area

- Two NHS Advisors on hand within the Habbo hotel – one in the bus and one talking to the girls in the queue for the bus
- Habbo sessions are open every Thursday between 4.30pm-6.30pm when girls are out of school and online
- There is also a web chat activated between 4.30-6.30pm
- These sessions proved extremely successful last year, and again this year we have seen a large number of girls queuing to meet the advisors
Did we have a crisis?

- 28th September 2009 - 14-year old girl dies 75 minutes after HPV vaccination at school
- 29th September - Director of Immunisation letter quarantines the vaccine batch across the UK
- 30th September - Director of Immunisation letter shares the preliminary autopsy results - death was due to a rare serious underlying medical condition
- 1st October - post mortem confirms that death was due to a large malignant tumour
- no indication that the vaccine was a contributing factor
Does communication matter?

• 2008, Romania introduced an HPV vaccine programme
• programme not supported by communications
• cohort of 111,000, low acceptance
• limited uptake to 2,615 doses
• Next steps for Romania –
  • implement an information campaign and then
  • re-launch the programme
Key Messages

• Be prepared – plan ahead

• Plan for risk

• Understand your audience

• Target key audiences - use the right route

• Make sure the message and the messenger agree

• Remember – immunisation saves lives