USAID
FROM THE AMERICAN PEOPLE

PANDEMIC INFLUENZA

MESSAGE GUIDE

This publication was prepared by AED and funded by the United States Agency for International Development under contract number GHS-I-00-03-00036. It does not necessarily represent the views of USAID or the US Government.

July 2009

Table of Contents

Introduction ____ 1

1. How These Messages Were Developed ____ 3

2. How to Use This Guide ____ 5

3. Overview of Pandemic Influenza ____ 7

4. Analyzing a Message ____ 9

5. Increasing Awareness of Pandemic Influenza ____ 13

6. Key Non-Pharmaceutical Interventions/Behavioral Interventions ____ 17

7. How to Use These Key Messages for Material Development ____ 25

8. Appendices

Appendix 1. Proposed Key Action Analysis Sheet ____ 27

Appendix 2. WHO Influenza Pandemic Phases ____ 31

Appendix 3. Reliable Sources of Information on Pandemic Influenza/Human Influenza ____ 33

Appendix 4. Message Map ____ 35

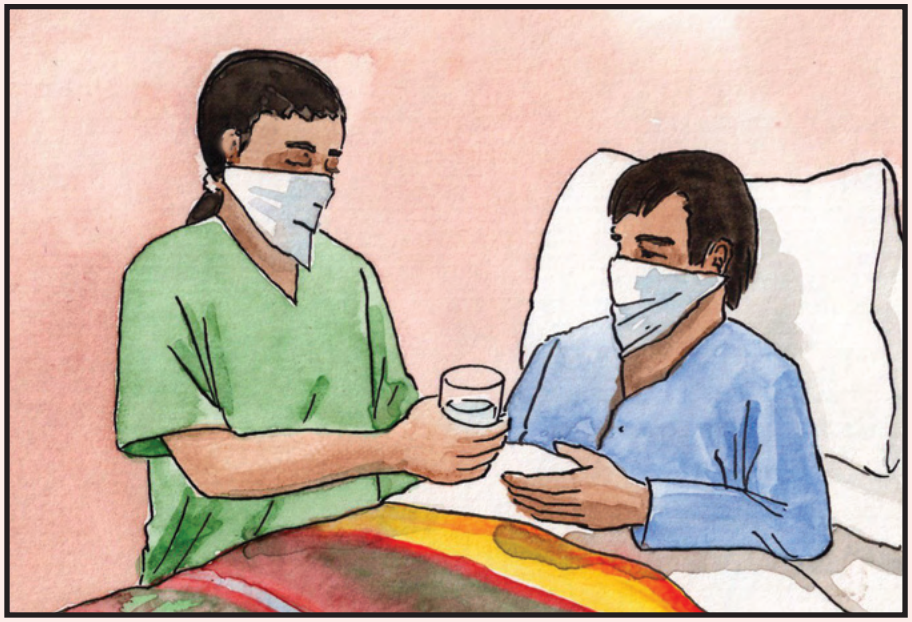
Appendix 5. Example of Material Developed by AI.COMM and HCP ____ 39

Introduction

An influenza pandemic is a recurrent event that occurs when a new influenza virus emerges and spreads easily from human to human in several regions of the world. The increase and ease of global travel and the higher concentration of people globally can lead an influenza pandemic to have a greater impact, especially in developing countries where health care systems are already overburdened.

During most disease outbreaks, communication through mass media, interpersonal communication, and community mobilization has been proven to be successful in increasing awareness as well as changing behaviors to help control and minimize the health impact of public health emergencies. The messages contained in these communications need to be consistent so that all of the information that is disseminated is clear and not confusing, and can thus effectively contain the spread of a pandemic or reduce morbidity and mortality caused by pandemic influenza.

Hence, message harmonization is an important activity. The purpose of this *Pandemic Influenza Message Guide* is to provide organizations with messages that address key actions to be taken to contain the spread of the virus throughout an influenza pandemic. **Messages on hygiene are applicable all the time—before and after a pandemic—but others on social distancing and isolation are not necessarily applicable until a pandemic influenza outbreak has begun**. Users of this guide should select key actions that are appropriate for their target audience(s) and adapt these key actions into appropriate materials and messages using local languages and expressions.



How These Messages Were Developed

1

Background

The United States Agency for International Development (USAID) has funded the Humanitarian Pandemic Preparedness (H2P) Initiative with the aim of reducing the risk of excess mortality and morbidity from an influenza pandemic. H2P is a partnership among the International Federation of Red Cross and Red Crescent Societies (IFRC), the CORE Group, AI.COMM (a project managed by AED), InterAction and several United Nations agencies.

H2P, the Ethiopian Red Cross Society, AI.COMM and the Health Communication Partnership (HCP) organized and facilitated a Message Harmonization Workshop on October 15 and 16, 2008 in Addis Ababa, Ethiopia. The workshop was organized with the goal of identifying key messages in the event of an influenza pandemic, and was attended by Ethiopian governmental agencies and non-governmental organizations.

Methodology

The workshop participants were divided into four groups, each relating to the four main non-pharmaceutical intervention (NPI) themes—good personal hygiene, respiratory etiquette, isolation and home care of the sick, and social distancing—with the task of identifying enabling and limiting factors. Then, realistic actions were identified to construct and prioritize key messages that could be adapted to the Ethiopian context.

Initial key messages that were identified during the group work were reviewed by technical experts from various organizations to ensure that the information was accurate and complementary to other messages. Following the workshop, HCP and AI.COMM worked together to develop this draft Message Guide that was also reviewed and revised by partner organizations before the draft was distributed, and a version was translated to Amharic.

Outcome

Although this work was conducted in Ethiopia, most of the messages are relevant to a global audience. As such, some messages have been revised from the original, Ethiopia-specific Message Guide so that they are more applicable to a worldwide audience. We expect this Guide will be an evolving and often-updated document to reflect developments in epidemiology, participatory research and other factors that could inform the content and delivery of messages.

How to Use This Guide

2

Q: How can I use this guide?

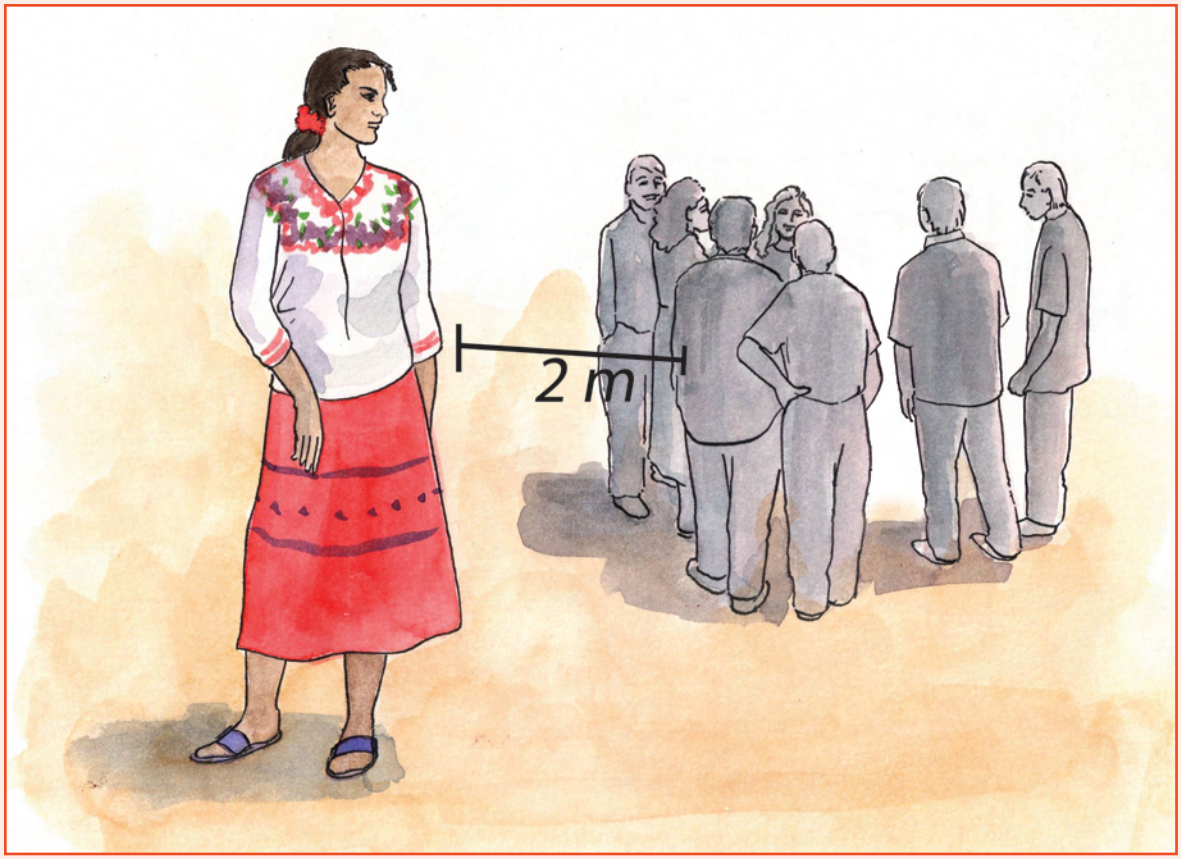
A: If your organization would like to develop communication materials relating to pandemic influenza, this guide is a good starting point. The information is based on science and has also formed the basis for messages by global health experts such as the World Heath Organization. It also reflects good practices that are feasible, have little or no expense, and are easy to adopt. Simply select the messages that pertain to your subject matter, adapt them to your area, and build your communication materials around them.

Q: What can I do if I do not agree with the terms used in a message?

A: The content of the messages in this guide are scientifically accurate as of publication time, so you should not change it. For example, if a message promotes covering the nose and mouth when sneezing and coughing, you should not produce materials promoting covering the nose and mouth when coughing only. You should feel free, however, to change the language of the message if it will help your intended audience understand it better.

Q: Are there actions families should take to address pandemic influenza that are not included in this guide?

A: Yes. This guide contains key messages relating to pandemic influenza but it is not an exhaustive list of messages. Some information, such as influenza symptoms, may need to be revised after more is known about the behavior of a new pandemic influenza virus. For up-to-date information, consult the sources in Appendix 3.


2 m

Overview of Pandemic Influenza

3

An influenza pandemic occurs when a new form of the influenza virus starts spreading. Because it is a "new" virus that has never before circulated, people tend to have little resistance to it and it therefore can spread easily from person to person worldwide.

Previous influenza pandemics have led to widespread disease and death. Recently, the H5N1 virus (also known as avian influenza) and the H1N1 virus (also known as 2009 swine flu) have brought about the largest and most severe outbreaks of sickness and death in humans and animals, as well as the most concern that they would lead to the first influenza pandemic of the 21st century. Since the Message Guide was written, WHO, in fact, has classified the 2009 H1N1 virus as a pandemic virus, signifying that it spreads reliably from person to person and is registered in most regions of the world.

Even though it might sound exotic, pandemic influenza can be transmitted in the same way that seasonal influenza is spread—through droplets from the mouth and nose when coughing, sneezing or touching objects contaminated with the virus. Seasonal outbreaks of the flu are caused by flu viruses that are already circulating among people, and people have some resistance to them. Pandemic influenza is caused by a new virus that people tend to have little resistance to, and usually infects many more people worldwide.

Vaccination to prevent getting the virus and antiviral medications that reduce symptoms such as aches and pains are important pharmaceutical interventions to reduce morbidity and mortality—when they are available and used properly. However, inadequate supply for wide distribution, cost and timely availability can hinder the response and lessen the impact of these interventions.

Instead, non-pharmaceutical interventions (NPI) that individuals and communities can take to reduce contact and consequently person-to-person transmission of influenza can contain and delay the spread of pandemic influenza and reduce the number of cases of morbidity and mortality.

Non-pharmaceutical interventions refer to measures such as:

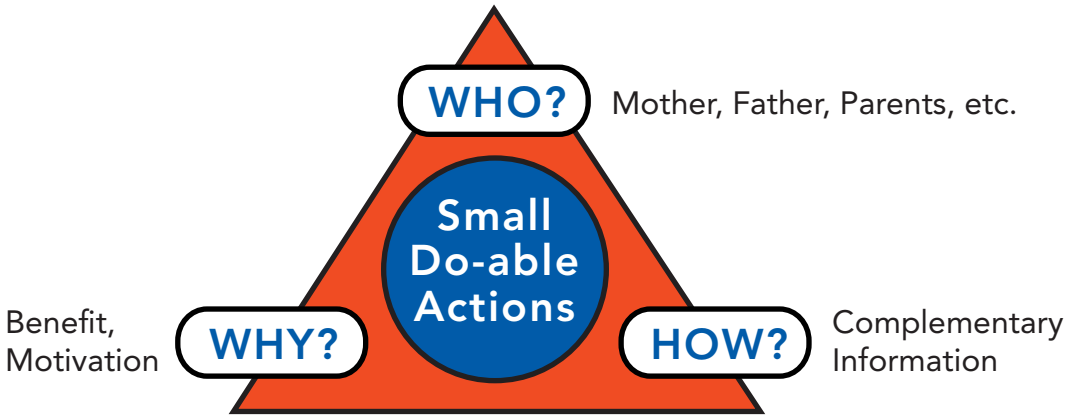
- Maintaining good personal hygiene,
- Good respiratory etiquette,
- Isolation and home care of the sick, and
- Social distancing.

Measures such as hygiene and respiratory etiquette can be implemented through ongoing health promotion efforts, while other measures such as social distancing require substantial advance planning and would only be implemented during a moderate or severe pandemic.

Analyzing A Message

4

The diagram below shows the main components of an effective message.



1. Why does each message in this guide promote a small, "do-able" action?

Traditionally, health communication materials and programs have focused on increasing knowledge and awareness of healthy behaviors. In recent years, however, ***it has become clear that increasing knowledge is not enough to prompt people to change their behaviors or practices. Achieving that requires that messages affect not just knowledge, but steer people toward a behavior***. To determine the do-able actions, enabling and limiting factors that influence the adaptation of a behavior or practice were identified during the Ethiopia message harmonization workshop.

Enabling factors—such as availability, accessibility, or existing norms—make it easier for individuals to change their behaviors or practices. On the other hand, cost, lack of awareness, or fear of stigma can be limiting factors that hinder a person from adapting healthful behaviors. By determining and addressing enabling and limiting factors, messages can be crafted to be more conducive to bringing about behavior change.

2. Why do we link the word "action" to "do-able"?

The adjective "do-able" means that the suggested action does not represent a major challenge for the target population to do. This is the case if the action:

- Is simple
- Does not take a great amount of time
- Is inexpensive or no cost
- Is culturally acceptable

Quite simply, the more an action meets these criteria, the more likely it is that people will be convinced to do it.

Example of do-able actions:

- Cover your cough and sneeze with your elbow.
- Wash your hands using soap and water before eating.

3. Whom do the messages in this guide target?

The messages in this guide target ***individuals and families at the household and community levels. When developing messages, it is important to choose an audience to target and then tailor the message to that audience***.

Examples of target audiences:

- Caregivers (e.g., mothers/fathers/parents)
- Religious leaders
- Health care workers

4. What is a benefit and why is it important to include one in a message?

In a message, the benefit is ***what will happen if someone carries out the recommended*** action: "If you do X, then you will get Y." ***The benefit answers the question "Why should I do this?"*** Usually, each action has several benefits.

For example: *If you wash your hands with soap and water every time before preparing and eating food, you can protect yourself from becoming sick with the flu*. The key to effective communication is establishing which benefit is most compelling for the intended audience and clearly communicating that benefit to them.

5. What is complementary information?

Complementary information is the additional information that is not the key action or message but relates to the action or message. ***It answers the questions the intended audience is likely to ask about the message.*** For example, for a message about pandemic influenza, the complementary information might answer the question: Why is pandemic influenza serious?

Key Message

Protect yourself from becoming sick with pandemic flu by washing your hands with soap and water.

Complementary Information

Q. Why is pandemic flu more serious than a cold or the common flu?

A. *You and your family have little or no immunity to a pandemic flu virus, which will increase the likelihood of causing you to feel very sick and creating other health complications such as pneumonia.*

When you develop a message, make sure that you include:
what the action is, who should take the action, and the benefit of doing the action. Determine the amount of complementary information to be included depending on the channels and approach of communication. For example, you will have more time during interpersonal communications (e.g., meetings, presentations, health visits) to include complementary messages as opposed to a short TV or radio spot.

Increasing Awareness of Pandemic Influenza

5

PANDEMIC INFLUENZA CAN HAVE SEVERE SYMPTOMS. EVERYONE IS AT RISK AND IT CAN CAUSE SERIOUS ILLNESS AND DEATH.

SAMPLE MESSAGE 1

Teach your household members that pandemic flu can make them very sick.

Complementary Information

Q. How is pandemic flu different from the common flu?

A. Pandemic flu has similar symptoms to the common flu, but can cause more severe illness or complications because it is usually a virus that has never before circulated among people, so they are not likely to have immunity to it.

Q. What makes pandemic flu dangerous?

A. Pandemic flu, like seasonal flu, passes from person to person very easily, but it can cause serious health complications and death without the proper care.

Q. How does pandemic flu pass from person to person?

A. Pandemic flu passes from person to person in two ways:

- Breathing the air when droplets are released from the nose and mouth of a sick person when they are sneezing, coughing or breathing.
- Touching surfaces—such as cups, telephones, or door knobs—contaminated by the sick person.

Q. How do I know I have pandemic flu and not the common flu?

A. Pandemic flu usually has similar symptoms to the common flu, such as: Fever, runny and stuffy nose, sneezing, headache, fatigue and body aches. It is difficult to differentiate the symptoms of pandemic flu from the common

flu, but a laboratory test can confirm infection with a pandemic virus. You should take the same precautions regardless of whether you have regular flu or pandemic flu.

Q. What do I do if I have flu symptoms?

A. If you experience any of the symptoms, you should stay at home to avoid giving the virus to other people. If you start having complications, such as trouble breathing, you should go to your nearest health care facility.

Q. Are there particular groups in the community that are likely to get very sick from pandemic flu?

A. Pandemic flu viruses can severely affect all types of people, even ones who usually would not be at high risk of becoming very sick, such as healthy young adults. Usually, however, people over the age of 65, children under the age of two, pregnant women and adults with health problems such as heart and lung disease, diabetes, anemia, cancer, and HIV have an increased risk of developing other infections if they are infected by a flu virus.

Q. How can the flu cause serious complications?

A. Infection with the flu can lead to other infections, such as pneumonia, bronchitis, kidney and heart failure.

SAMPLE MESSAGE 2

Seek information about the situation from a reliable and trusted source since symptoms, severity, and duration of pandemic influenza will not be known until the pandemic starts.

Complementary Information

Q. Where can I get reliable (correct) information?

A. Some of the people you can go to for more information are health workers, local authorities and public health experts. Staying in contact with such people will help give you access to correct information.

Q. What can we do to help keep our community calm during a pandemic outbreak?

A. The first step is to make sure that information being reported is correct and that it comes from a credible source. During a national emergency such as an influenza pandemic, the media plays an important role in helping to maintain calm and reduce panic. It can do this by regularly broadcasting correct information and by stopping rumors and misinformation.

Q. Where can I find more information about pandemic influenza?

A. There are several regularly updated web sites that you can visit that have in-depth information on pandemic influenza. (See Appendix 3).

Key Non-Pharmaceutical/ Behavioral Interventions

6

HAND AND SURFACE HYGIENE ARE IMPORTANT. PROTECT YOURSELF AND YOUR FAMILY FROM BECOMING SICK.

SAMPLE MESSAGE 1

Wash your hands with soap and water frequently; this will minimize the spread of the flu.

Sub-messages:

- Wash your hands with water and soap before preparing and eating food.
- Wash your hands with water and soap before and after caring for or contact with a sick person.
- Wash your hands with water and soap after sneezing, coughing or blowing your nose.
- Wash your hands with water and soap after touching materials used by a sick person.

SAMPLE MESSAGE 2

Show and teach your household members to wash their hands with water and soap to minimize the spread of the flu.

Sub-messages

- Teach your household members to wash their hands with water and soap **before preparing and eating food**.
- Teach your household members to wash their hands with water and soap **before and after caring or contact with a sick person**.
- Teach your children to wash their hands with water and soap **after sneezing, coughing or blowing their nose**.

- Teach your children to wash their hands with water and soap **after touching materials used by a sick person**.

Complementary Information

Q. Will washing hands cure the flu?

A. No, washing your hands can only help to prevent the flu from spreading and causing illness.

Q. What does it mean to wash my hands frequently?

A. Wash your hands frequently means every time:

- Before preparing and eating food
- Before and after caring for or contact with a person who has the flu
- After sneezing, coughing or blowing your nose
- After touching something used by a person with the flu

Q. Why is handwashing after using the toilet not included in the list above?

A. Pandemic flu is not transmitted through contact with feces. The list above includes situations that can lead to the transmission of the flu. However, it is still important to wash your hands after using the toilet to prevent many other illnesses and stay healthy.

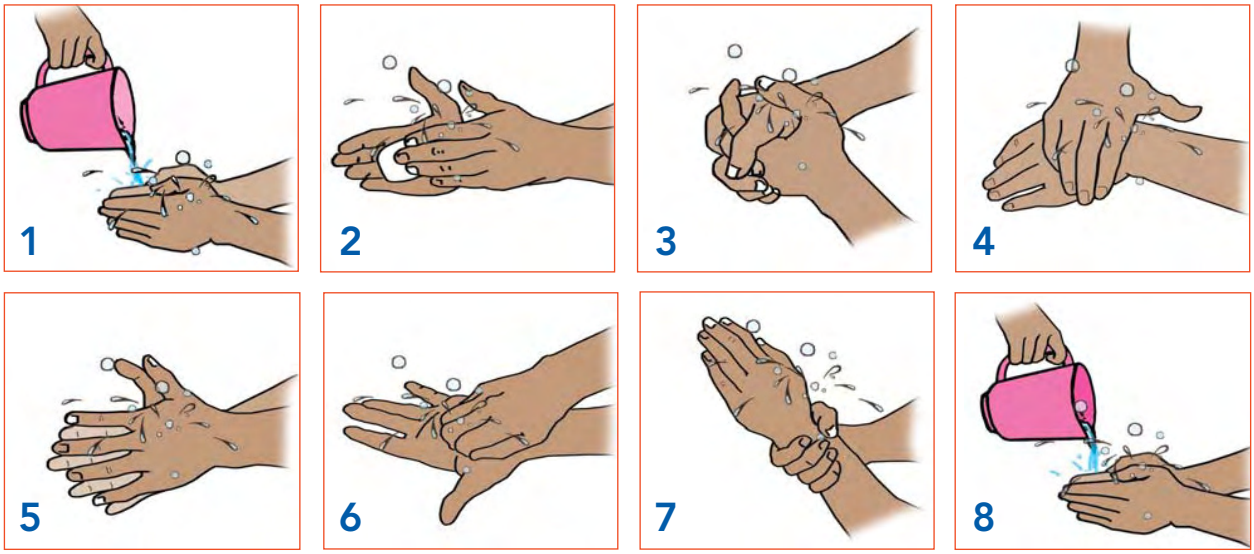
Q. I wipe my hands with a cloth after I sneeze or cough. Is that enough?

A. Wiping your hands with a cloth does not kill the germs. Wiping your hands only transfers some of the germs on to the cloth.

Q. Isn't water enough to wash hands?

A. Water and soap are necessary to germs. You have to wash your hands correctly; here are some steps to follow to kill the germs:

1. Wet hands with water.
2. Rub soap with hands.
3. Rub the palms together.
4. Rub the back of each hand with the other hand.
5. Wash the spaces between all fingers.
6. Wash under your nails.
7. Wash your wrists.
8. Rinse with water thoroughly.



SAMPLE MESSAGE 3

Clean surfaces such as door knobs, light switches, telephones, sinks, tables, and drinking and eating utensils that are touched by a person with the flu with soap and water regularly to avoid contamination and the spread of the flu.

Complementary Information

Q. How often is regularly?

A. Regularly means every time:

- Before preparing and eating food
- Before and after caring or contact with a person who has the flu
- After sneezing, coughing or blowing nose
- After touching materials used by a person with the flu

RESPIRATORY ETIQUETTE

IF YOU DO NOT HAVE A TISSUE OR CLOTH, SNEEZE OR COUGH INTO YOUR ELBOW. IT IS EFFECTIVE.

SAMPLE MESSAGE 1

Block your coughs and sneezes with your elbow, a cloth or a tissue to avoid contamination and spread of the flu.

SAMPLE MESSAGE 2

Show and teach your household members to block their coughs and sneezes with their elbow, a cloth or a tissue to avoid contamination and spread of the flu.

Complementary Information

Q. I cover my cough and sneeze with my hand. Is that good enough?

A. No, covering your coughs and sneezes with your hand can block your cough and sneezes, but it will transfer germs onto your hands and then you will contaminate things that you touch with the flu.

Q. I cover my cough and sneeze with my hands and wash my hands immediately. Is that good enough?

A. Yes, if you wash your hands correctly and every time you cough or sneeze, you can avoid contaminating surfaces and spreading the flu.

Correctly

1. Wet hands with water.
2. Rub soap with hands.
3. Rub the palms together.
4. Rub the back of each hand with the other hand.
5. Wash the spaces between all fingers.
6. Wash under your nails.
7. Wash your wrists.
8. Rinse with water thoroughly.

Every Time

- Before preparing and eating food
- Before and after caring for or contact with a person who has the flu
- After sneezing, coughing, or blowing your nose
- After touching anything used by a person with the flu

SAMPLE MESSAGE 3

Dispose of tissues in a trash bin after wiping or blowing your nose or put handkerchiefs away to avoid contamination and spread of the flu.

SAMPLE MESSAGE 4

After disposing tissues or putting handkerchiefs away, wash your hands with soap and water to avoid contamination and spread of the flu.

SAMPLE MESSAGE 5

Show and teach your kids to dispose of tissues in a trash bin after wiping or blowing their nose and to put handkerchiefs away to avoid contamination and spread of the flu.

SAMPLE MESSAGE 6

Show and teach your kids to wash their hands with soap and water after disposing tissues or putting kerchiefs away to avoid contamination and spread of the flu.

SAMPLE MESSAGE 7

If you or anyone in the family has the flu symptoms, it is important that the person with the symptoms wear a mask or a scarf; this will prevent others from getting sick.

Complementary Information

Q. What if the person who is having the symptoms cannot wear a mask or a scarf?

A. If the sick person in your house cannot wear a mask, any caretaker who is going to take care of the sick and will be in close contact should wear a mask or a scarf.

ISOLATION

IF YOU ARE SICK, REST AND RECOVERE IN A SEPARATE ROOM OR SPACE.

SAMPLE MESSAGE 1

If you or anyone in your family is showing symptoms of the flu, rest and recover in a separate room or space until you recover fully to avoid spreading the disease to others.

Complementary Information

Q. For how long does a person with flu symptoms stop going to work, school and public gatherings?

A. All individuals should stay home in a separate room until they are fully recovered and do not have symptoms.

Q. What if a separate room is not available?

A. If separate rooms are not available, use a corner in one room and create a separation using a curtain. Stay at least two meters away from others.

SAMPLE MESSAGE 2

Assign one person in the family to be a caregiver to the sick family member to avoid exposing all family members to the flu.

Complementary Information

Q. What does the person who is sick need to do?

A. To avoid spreading the flu to others, the person who is sick should do the following:

- Keep a distance of 2 meters from persons who are not sick.
- Wear a mask that covers the nose and mouth when they are in the presence of others.

Q. How does the caregiver care for persons who are sick?

A. To care for the sick, you should do the following:

- Keep the room where the sick are isolated well ventilated.
- Caregiver and the sick person should wear a mask.
- Limit the number of visitors and duration of visits to the sick person, and keep a 2 meter distance from the sick person.
- Wash hands with soap and water before and after caring for the sick person.
- Separate the eating and drinking utensils, towels, sheets, and blankets used by the sick person from the ones used by others.

SOCIAL DISTANCING

LIMIT YOUR TRAVEL AND REMAIN HEALTHY.

SAMPLE MESSAGE 1

You and your family should limit travel and stay home as much as possible when the pandemic flu is circulating in your area to remain healthy.

Complementary Information

Q. How do we limit travel?

A. You can limit your travel and lessen the chances of your exposure and infection with the new flu by:

- Avoiding crowded events (funerals, church, social gatherings).
- Avoiding visits to sick friends and family.
- Using public transportation when it is less crowded.
- Designating one person in the family to go to markets or on other errands.

How to Use These Key Messages for Material Development

7

Messages can be conveyed through a range of materials in several ways according to the target audience. Such materials can include:

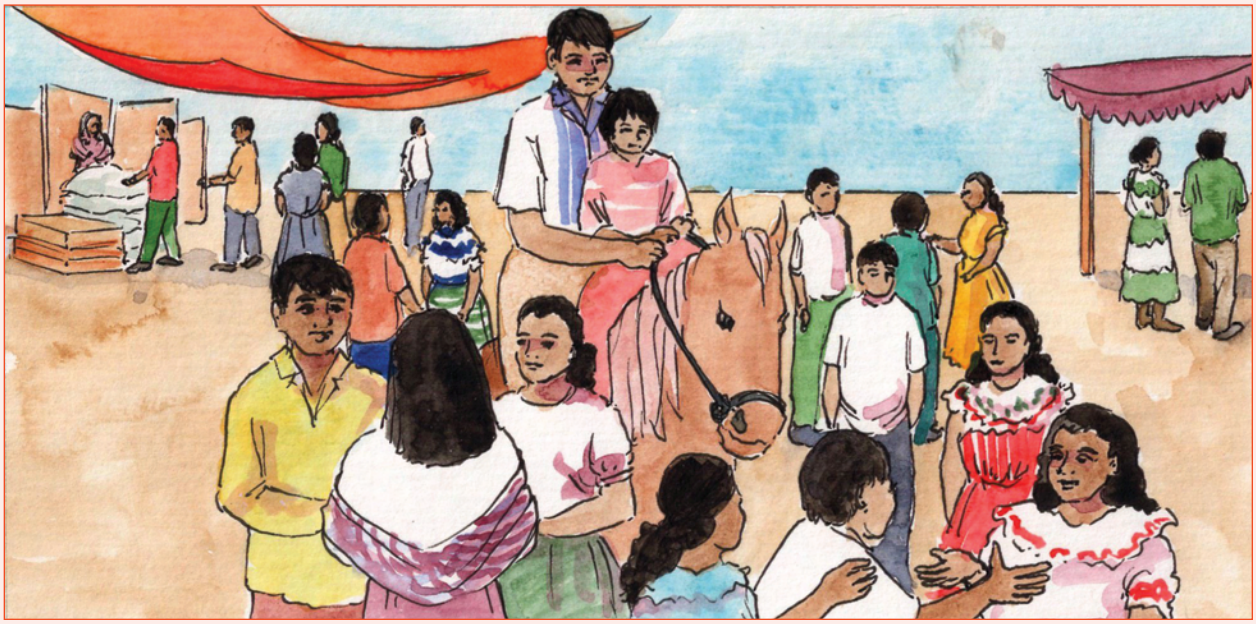
- Informational and educational materials such as brochures, leaflets, and posters
- Negotiation and counseling materials such as counseling cards
- Mass media materials such as radio and television spots

It will be the task of each organization to produce and pre-test materials for message and language clarity, attractiveness, and comprehension in addition to planning the use and distribution of materials. This section assumes that there is an overall communication strategy that identifies objectives, target audiences, and dissemination strategies. Creating a message map (see Appendix 4) can help you think through the target audiences, activities, materials and dissemination of various messages related to pandemic influenza.

Following are some steps that you can follow to adapt or create materials that incorporate key messages.

1. Do an initial review of materials to see if you can adapt existing materials or if you need to develop new ones.
2. If you are adapting existing materials, use qualitative research methods such as focus groups or interviews among members of the target audience to assess the understandability and appropriateness of the materials (text and illustrations) and messages. This testing should be conducted in individual interviews for illiterate audiences. Also get the opinions of "key informants," such as public health officials, local government officials, and others who might have a stake in the messages.
3. Make revisions based on the results of the qualitative research.
4. Test the resulting materials again with the target audiences.
5. When the audience is satisfied with the material, the next step is production of the material (for example, printing).
6. Once materials are produced they need to reach the intended audience along with proper training on how to use the materials.

Throughout these adaptation or material creation steps, make sure that community partners guide the process. Make it as participatory as possible.



Appendices

8

APPENDIX 1. PROPOSED KEY ACTION ANALYSIS SHEET

This appendix represents an overview of the worksheet used for in group work activity during the Message Harmonization Workshop in Ethiopia to identify do-able actions that can later be modified to become key messages.

Proposed Key Actions	Limiting Factors	Enabling Factors	Do-able Actions
WASH			
1. Wash your hands frequently. 2. Wash your hands with soap and water. 3. Wet hands first, then add soap to your hands. Rub all surfaces of your hands and fingers for at least 15 seconds. Then rinse with water and dry if you have a clean towel or paper towel. **A. BEFORE** a. Preparing food b. Eating food c. Contact with sick patients **B. AFTER** a. Using toilet b. Changing children c. Contact with sick people d. Cleaning a sick person's dirty sheets, towels, clothes e. Handling a sick person's dirty sheets, towels, clothes f. Handling animals g. Handling animal waste	• Lack of awareness • Habit • Laziness • Low access to water (no running water) • Unavailability of soap and water everywhere • Poor understanding of risk • Poor understanding of value of soap and water	• Cultural norm of washing hands before eating • Soap is cheap and available.	Wash your hands using soap and water before eating.

RESPIRATORY ETIQUETTE			
1. Cover your cough and sneeze with a tissue or cloth. 2. Sneeze into crook of elbow or tissue instead of hand. 3. If you are sick, wear a mask. 4. If you are sick, keep yourself from spreading the droplets: wear a mask. 5. Clean surfaces regularly with soap and water to avoid self-contamination. 6. Clean surfaces regularly with: a. Soap and water. b. Bleach. c. Chlorine to avoid self contamination.	**Tissue and Cloth** • Cost and availability of tissue • Awareness • No pockets to put hand kerchiefs away. • Using elbow is not the common practice. • Physically inconvenient • Can make clothes dirty • Disposal/regularly cleaning elbow **Wear a mask** • Not easily available • Stigma • Inconvenience/ discomfort • Religious norms **Clean surfaces** • Cost of detergents • Shortage of water (not enough) • Very difficult and time consuming to clean regularly	**Tissue/Cloth** • Build on the cultural norm of using handkerchiefs. **Elbow** • Readily available (no issue of cost or availability) **Wear a mask** • Risk perception • Availability of stock for high-risk population • Provision of mask by government and international bodies **Clean surfaces** • Continuous government effort to increase water availability	• Cover your cough and sneeze using available materials. • Cover your cough and sneeze with your elbow. • Wear a mask if you are sick, if you are caring for the sick, and if you are well and do not want to get sick. • Use a piece of cloth/ scarf as a mask to cover your nose and mouth when sick. • If you are sick, wear a mask not to get others sick. • If you are not sick, wear a mask to protect yourself. • Clean surfaces regularly with water and soap or other detergents (bleach solution, chlorine).

ISOLATION			
1. Isolate those who are sick in one room or area. 2. Appoint only one caregiver in your house hold to care for the sick. 3. If sick, wear a mask or scarf when the care givers or others are present. 4. If you come in close contact with a sick person, wear a mask. 5. If sick don't share toothbrushes, cigarettes, eating utensils, drinks, towels, sheets and blankets. 6. If sick stay home until you are fully recovered.	• Cultural norm of close contact • Many people live in single-room houses. • Pre-school age children are expected to stay in the home (potential exposure to ill family members). • Visiting the ill is a very important cultural practice. • Low levels of awareness regarding modes of transmission • Masks are not fully protective. • Communal eating, sleeping, and sharing of utensils is common. • Limited availability of utensils and water for washing • Many people can't afford to stop work (seasonal). • Those who are not severely ill may be expected to go to church.	• Existing strong social networks, including religious leaders (which can also be a constraint) • Some households have 2 buildings, such as a main house and separate kitchen. • People have scarves and/ or handkerchiefs. • People commonly use handkerchiefs when they have a cold. • Hand washing before eating is traditional. • Some people may be able to limit contact with others while working (farming). • All children are generally allowed to stay home from school when ill. • Very ill adults are generally expected to stay home from work.	• Use traditional media, social networks, and religious leaders. • If possible, stay 1 – 2 meters away from the space used by others in the house. • Use tent for the sick. • Use sheets to separate the sick from others in single-room houses. • Well should stay in kitchen, ill in house. • Ill should stay in school or other community building. • Limit the number of visitors to 2 or 3 people. • The ill and caregivers should wear a scarf or handkerchief when near each other, to reduce disease transmission— even though these are not fully protective. • If possible, use separate utensils, clothing, bed sheets, etc., for the ill. • This may require community problem solving. • Some communities may be able to loan utensils, etc., to households with ill. • Anyone who is ill with flu symptoms should stay home from work or school until they are well.

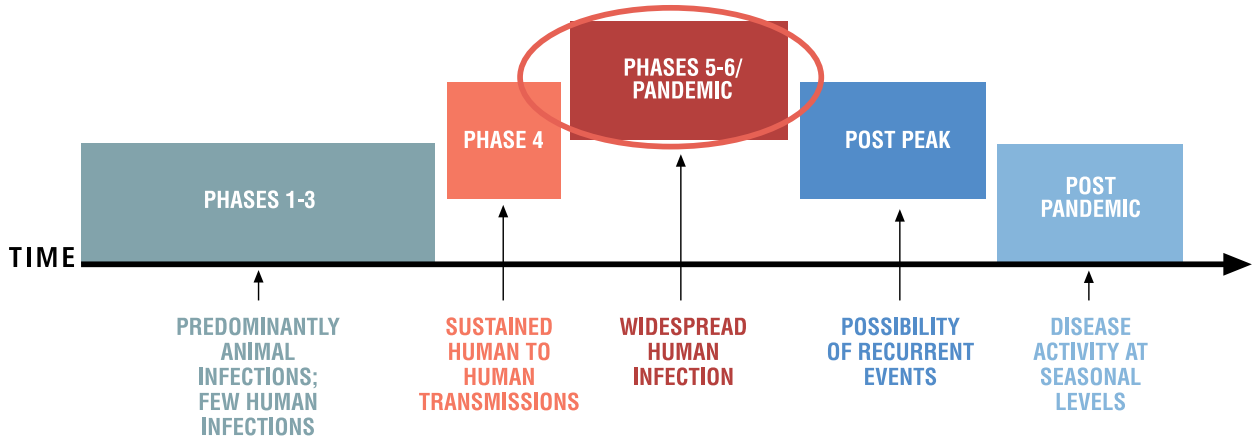
SOCIAL DISTANCING			
1. Keep your distance, at least 2 meters, away from other people during an outbreak. 2. Avoid crowds. 3. Send only one designated person to the market. 4. Limit your travel. 5. Avoid crowded public transportation if possible. 6. Stay at home. 7. Work from home, if possible.	a. Church or mosque attendance b. Funerals c. Visiting sick person d. Sharing common plates/ cups e. Consensus not built among communities, workers, students. f. Sharing of common living space g. Limited knowledge on flu transmission factors h. Cultural and behavioral issues (extended family and attachment) i. Limitation of resources (daily laborer), church	• Policies supporting social distancing • Churches, mosques are influential to change community attitudes. • Existing structure of community health workers	• Enhance community awareness on the importance of social distancing to prevent or control spread of flu. • Consensus is necessary for a student, worker, etc. to stay at home during illness. • Involve churches, mosques in community awareness plans/ activities. • Build consensus at different levels. • Sustainable and effective community awareness and communication plan

APPENDIX 2. WHO INFLUENZA PANDEMIC PHASES

In the 2009 revision of the phase descriptions, WHO has retained the use of a six-phased approach for easy incorporation of new recommendations and approaches into existing national preparedness and response plans. The grouping and description of pandemic phases have been revised to make them easier to understand, more precise, and based upon observable phenomena. Phases 1–3 correlate with preparedness, including capacity development and response planning activities, while Phases 4–6 clearly signal the need for response and mitigation efforts. Furthermore, periods after the first pandemic wave are elaborated to facilitate post-pandemic recovery activities.

The current WHO phase of pandemic alert is 6.

PANDEMIC INFLUENZA PHASES



In nature, influenza viruses circulate continuously among animals, especially birds. Even though such viruses might theoretically develop into pandemic viruses, in **Phase 1,** no viruses circulating among animals have been reported to cause infections in humans.

In **Phase 2,** an animal influenza virus circulating among domesticated or wild animals is known to have caused infection in humans, and is therefore considered a potential pandemic threat.

In **Phase 3**, an animal or human-animal influenza reassortant virus has caused sporadic cases or small clusters of disease in people, but has not resulted in human-to-human

transmission sufficient to sustain community-level outbreaks. Limited human-to-human transmission may occur under some circumstances, for example, when there is close contact between an infected person and an unprotected caregiver. However, limited transmission under such restricted circumstances does not indicate that the virus has gained the level of transmissibility among humans necessary to cause a pandemic.

Phase 4 is characterized by verified human-to-human transmission of an animal or human-animal influenza reassortant virus able to cause "community-level outbreaks." The ability to cause sustained disease outbreaks in a community marks a significant upwards shift in the risk for a pandemic. Any country that suspects or has verified such an event should urgently consult with WHO so that the situation can be jointly assessed and a decision made by the affected country if implementation of a rapid pandemic containment operation is warranted. Phase 4 indicates a significant increase in risk of a pandemic but does not necessarily mean that a pandemic is a forgone conclusion.

Phase 5 is characterized by human-to-human spread of the virus into at least two countries in one WHO region. While most countries will not be affected at this stage, the declaration of Phase 5 is a strong signal that a pandemic is imminent and that the time to finalize the organization, communication, and implementation of the planned mitigation measures is short.

Phase 6, the pandemic phase, is characterized by community level outbreaks in at least one other country in a different WHO region in addition to the criteria defined in **Phase 5**. Designation of this phase will indicate that a global pandemic is under way. During the post-peak period, pandemic disease levels in most countries with adequate surveillance will have dropped below peak observed levels. The post-peak period signifies that pandemic activity appears to be decreasing; however, it is uncertain if additional waves will occur and countries will need to be prepared for a second wave.

Previous pandemics have been characterized by waves of activity spread over months. Once the level of disease activity drops, a critical communications task will be to balance this information with the possibility of another wave. Pandemic waves can be separated by months and an immediate "at-ease" signal may be premature.

In the **post-pandemic period**, influenza disease activity will have returned to levels normally seen for seasonal influenza. It is expected that the pandemic virus will behave as a seasonal influenza A virus. At this stage, it is important to maintain surveillance and update pandemic preparedness and response plans accordingly. An intensive phase of recovery and evaluation may be required.

APPENDIX 3. RELIABLE SOURCES OF INFORMATION ON PANDEMIC INFLUENZA/HUMAN INFLUENZA

World Health Organization (WHO)

http://www.who.int/csr/disease/avian_influenza/en/index.html
"Reducing excess mortality from common illnesses during an influenza pandemic"
http://www.who.int/diseasecontrol_emergencies/guideline/en/index.html

For the Current WHO Pandemic Phase

http://www.who.int/csr/disease/avian_influenza/phase/en/index.html

WHO Epidemic and Pandemic Management Response

http://www.who.int/csv/en

International Federation of Red Cross and Red Crescent Societies (IFRC)

http://www.ifrc.org/what/health/relief/avian-flu.asp

CORE Group

http://www.coregroup.org/h2p/start.cfm

AED/AI.COMM

http://www.avianflu.aed.org/globalpreparedness.htm

Human Pandemic Preparedness Initiative (H2P)

www.pandemicpreparedness.org

InterAction

http://preparedness.interaction.org/
http://www.interaction.org/disaster/avian/

United Nations Pandemic Influenza Contingency Group/OCHA

http://www.un-pic.org/pic/web/index.aspx

UNICEF

http://www.unicef.org/avianflu/

American Red Cross

http://www.redcross.org/news/ds/panflu/

U.S. Centers for Disease Control and Prevention

http://www.cdc.gov/flu/pandemic/

APPENDIX 4. MESSAGE MAP

	Pandemic Alert period			Pandemic Period
	Phase 3	**Phase 4**	**Phase 5**	**Phase 6**
	Objective: Contain or delay spread at the source			**Objective:** Reduce morbidity, mortality and social disruption
1. Target Audiences a. **Household members**—Adults and children living in a house, rural area; low income, and low literacy rate b. **First responders**—At the community level—Community health workers, teachers, Red Cross volunteers, youth club members, community/religious leaders, model families (early adopters), medical professionals				
2. Material Type/Description a. **Households:** Booklet—Some text with illustration and checklist; easy to understand and easy to put on wall with reminders that call for action b. First Responders: Cue/counseling cards —Illustrations for the viewers and text to guide discussion and negotiation				
3. Message Distribution Venues Religious services, market place, house to house, cross country bus stations, hospitals, health center and posts, schools, first responders				
4. Activities **IPC** Training guide for first responders (CHW, Red Cross volunteers, youth club members, religious/community leaders, model families for health/ agriculture) on using cue cards **Capacity Building** Training of first responders' trainers on materials (cue cards and booklets)				
5. Sources for updated information **CDC: www.pandemicflu.gov** **WHO: www.who.int**				

6. Complementary Messages/ Information				
Increasing awareness of pandemic influenza				
Do you think you and your family can catch pandemic flu? • You and your family can get the flu virus by close contact with a person who has the flu. • Droplets are released from the nose and mouth when sneezing, coughing and breathing, thus contaminating the air (distance). • Breathing the air or touching areas and surfaces that are contaminated can transmit the flu from person to person. • Pandemic flu can cause very serious illness even though the symptoms may seem like the common flu. • A person can have the virus for several days before they feel sick. You cannot tell who has the virus by looking at them.		✓	✓	✓
Have you heard of people dying from pandemic flu? • Pandemic flu can cause serious illness and death.		✓	✓	
Do you know what you need to do to survive pandemic flu? • Know the symptoms of the flu. • Know where to get information. • Know where to report symptoms. • Advise contacts to remain vigilant for symptoms. • Know and practice the easy and effective methods you or your family can do to survive the flu. • Make a plan with your family using the checklist (self-monitoring and diagnosis, social interaction, isolation, mask).		✓	✓	✓
HYGIENE/HANDWASHING/CLEANING				
Washing your hands with soap and water frequently is critical to minimize the spread of the flu. **By washing your hands every time** • Before preparing and eating food • Before and after contact with a person that has the flu				

• After sneezing, coughing or blowing your nose • After caring for and touching materials used by a person with the flu **You can prevent the virus from making you sick.**				
Washing your hands with soap and water is critical to minimize the spread of the flu. • Wet hands first and soap them up. Rub front and back of hands and between fingers. Rinse with water and dry your hands.				
Cleaning surfaces regularly is critical to avoid contamination and can minimize the spread of the flu. • Clean surfaces (door knobs, sinks, tables, drinking and eating utensils) that are touched by a person with the flu with soap and water or bleach at set intervals (every hour, twice a day, etc.) to avoid spreading the flu.				
COVER YOUR MOUTH WHEN YOU COUGH AND SNEEZE. (RESPIRATORY ETIQUETTE)				
It is important to cover your coughs and sneezes. • Use your arm, a cloth or a tissue to block your cough and sneezes. • If you have flu symptoms, wearing a mask or a scarf can prevent others from getting sick.		✓	✓	
Dispose of tissues properly to minimize spreading the flu.				
Appoint only one caregiver to care for the sick person. • Caregiver should limit the number and duration of visits to the ill when caring for the ill. • Caregiver should use a clean mask during patient care and wash hands afterwards. • Sick persons should wear a mask in the presence of others around them.				
Do not share utensils. • Use separate eating and drinking utensils, towels, sheets and blankets for people who are sick.				

SOCIAL DISTANCING				
During a pandemic influenza outbreak • Avoid crowded events (movies, funerals). • Avoid visiting sick friends and family. • Use public transportation during non-rush hours. • Send only one designated person in the family to the market. • Limit your travel and stay home as much as possible. If possible, work from home.				
PREPAREDNESS CHECKLIST				
Plan and discuss with family on who will care for the sick and how to implement isolation, who will go to the market, how to prevent transmission. 1. Educate household. 2. Assess/plan for home health care. 3. Stockpile foods, medication, supplies and other materials needed for 2-6 weeks. • When to stockpile? • What to stockpile? (Food items and non-food items)				

APPENDIX 5. EXAMPLE OF MATERIAL DEVELOPED BY AI.COMM AND HCP

Audience	Objectives	Materials
Organizations working on pandemic influenza	• To ensure consistency of messages during development of materials	Message Guide Question and Answer Guide (a reference tool) that will be used when developing communication materials
Household members	• To increase knowledge on detecting symptoms, practicing protective behaviors and providing proper home health care	Take Home Booklet Provides illustrations and easy to follow actions to remind household members of messages discussed with first responders and prompt them to take action
Community	• To facilitate education and negotiation by first responders in healthy behavior adoption during community outreach	Counseling Cards provides illustrations and questions and answers to enable negotiation of actions.
National and local leaders	• To increase knowledge that pandemic influenza poses a national/local threat • To draw leaders' attention and influence their emotion/motivation towards preparedness • To provide possible solutions, strategies and actions at the national and local levels	Advocacy Tool Kit for National Leaders Advocacy Tool Kit for Community Leaders
Journalists	• To increase knowledge about pandemic influenza • To provide journalists with accurate information to help them report on pandemic influenza	Media orientation Guide
Trainers of First Responders	• To increase knowledge on IPC and communication • To increase knowledge on how to use household booklets and counseling cards	Household Booklet and Counseling Cards Training Module