

# Public Information and Education

J. STEWART HUNTER

ON SEPTEMBER 1, 1957, a New York newspaper carried a roundup story on Asian influenza with this lead sentence: "The greatest teamwork in medical history has been stimulated by the threat of a spread of Asian influenza this fall." Later in the story the reporter wrote: "Communications from Geneva [World Health Organization] through the world's capitals to laboratories, health departments, universities, vaccine manufacturers, local physicians, and the general public is the key to today's medical teamwork."

Undoubtedly the Nation's readiness with respect to Asian influenza owed its heaviest debt to intercommunication among nations, among medical and scientific and public health professions, between industry and government, and between all of these elements and the populace. The interchange of information has been constant since June 10, 1957, when Surgeon General Leroy E. Burney called the first meeting of representatives of medical and health professions to discuss the influenza epidemics then appearing throughout the Far East and to consider courses of action should the disease spread to this country.

In this effort the role of public information and health education as an organized and integrated part of the Public Health Service's Asian influenza program has been fully recognized and fully employed.

In testimony before the Senate Appropriations Committee on behalf of a request for sup-

plemental funds for influenza activities, the Surgeon General said:

In the last analysis, the success of any large-scale effort to control an influenza epidemic depends upon an alert and informed public. We must avert the dangers of indifference on the one hand, and of undue hysteria on the other. This calls for current and reliable public information on the exact nature of the problem and on the actions which need to be taken. We plan to provide these informational and educational services, in cooperation with State and local health departments and professional groups.

The Congress appropriated \$110,000 for public information and educational purposes.

The Public Health Service has long recognized the importance of these activities, and information and public education are implicit in all its programs. In fact, the Service's basic legislation directs the Surgeon General to report on health matters periodically to the public and to the Congress, and to engage in health education activities. The Asian influenza program, however, represents a positive and explicit directive from the Congress to carry on an information campaign.

## Two Related Tasks

In this campaign, there were two distinct but related kinds of tasks. The first was to inform the public about Asian influenza and to alert people to the possibility of an epidemic in this country and of the actions taken to deal with it. The second was to encourage use of the new influenza vaccine as the only preventive measure available.

The first task was essentially a public information program. Like all similar programs, it entailed not only reporting fully on developments as they occurred but an educational effort

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*Mr. Hunter is Assistant to the Surgeon General for Information, Public Health Service. This article is based on a paper presented at the 1957 meeting of the American Public Health Association in Cleveland, Ohio.*

as well. The major emphasis was through mass media: newspapers, magazines, radio, television, films, pamphlets, and exhibits.

These facilities offer the most effective way of delivering a message to the eyes and ears of millions in the shortest possible time. This, of course, was the necessity which we faced. Information fully reported and properly interpreted through such media obviously is fundamental to the development of public understanding. There are, of course, many useful and essential channels.

The second task, to encourage use of vaccine, called for a sustained campaign of health education. In this campaign, the Service used both the mass media and the techniques of personal communication, although the emphasis, because of the limitations of time, had to be on the former. One of our important goals was to provide assistance to State and local health agencies, to professional groups, and to industry in their own information and health education programs.

To accomplish the first task, that of alerting and informing the public, the Service strengthened and intensified its means of imparting information through normal channels. For example, press releases were issued and press conferences were held immediately following all major policy decisions. Between June 7 and the beginning of December, the Service issued 35 press releases on Asian influenza alone, averaging more than 1 a week. In addition, the major meetings, such as the Surgeon General's special conference with the State and Territorial health officers in August, were open to the press and to representatives of other media. And, of course, State and local health officials, medical societies, and others interested in the program were kept regularly informed of incidence, vaccine supply, and other developments.

Considerable time and attention were given to working with magazine editors, staff writers, and free-lance contributors. Articles on Asian influenza have appeared in at least 32 magazines of wide national circulation, including *Reader's Digest*, *Life*, *Good Housekeeping*, and the various news weeklies. An incomplete tally shows that 60 such articles appeared from September through November 1957. In addition, there were numerous reports in specialized jour-

nals, trade magazines, house organs, and regional and State publications.

Papers and articles also appeared regularly in professional and scientific journals. Within the same 3-month period, for example, 14 articles on Asian influenza appeared in the *Journal of the American Medical Association*, several of them written by Public Health Service officials. There were similar articles in the periodicals of public health, nursing, pharmaceutical, and other professional organizations.

This was in line with another implicit directive from those who planned and administered the influenza program: a free and rapid interchange of information among professional groups. It was the job of public information and education personnel to apply their specialized skills and techniques to keep the information flowing and current. The material from the special meeting with the State and Territorial health officers, for example, was quickly reproduced and widely disseminated. The journals of the American Public Health Association, the American Medical Association, the American Hospital Association, the American Pharmaceutical Association, the nursing organizations, voluntary health agencies, and the State health departments spread the word rapidly to private physicians and other key people.

In fact, effective information services originated from a wide variety of sources and were conducted in an excellent spirit of cooperation. It should be emphasized strongly that the Asian influenza information program has been a cooperative enterprise throughout, with the noteworthy assistance of the communications industry itself. The reporting of the Asian influenza story by press, television, and radio, and by professional and specialized organs has been restrained, responsible, and enlightened. The newspapers and other media have almost without exception shown a ready understanding of the problems faced by health officials and a willingness to help.

A good example of this kind of cooperative action was a television program late in August on Westinghouse station KDKA in Pittsburgh. This program was produced by a joint effort of the television station, and the American Medical Association, the University of Pitts-

burgh, the Allegheny County Medical Society, and the Public Health Service. The participants included Dr. Burney and other officers of the Service, and Dr. George F. Lull of the American Medical Association. The show was carried in five major cities and over the educational television network of the University of Michigan. It was also kinescoped, and prints were sent to all the States. By mid-November, the film had been shown more than 200 times on 150 television stations in 41 States.

Many other television and radio appearances by senior officials of the Service, of State and local health departments, and of professional organizations also helped tell the story to the American people.

### **Films and Pamphlets Issued**

In another information field, the Public Health Service developed extra footage and otherwise brought up to date a film made in 1950 entitled "The Epidemiology of Influenza." Copies of this film were distributed for use by the States. Reports received by the Service indicated that the film had wide use on television and at public and professional meetings.

A number of new publications on influenza were developed by the Public Health Service and given wide distribution. These included a fact sheet on Asian influenza, a revision of the basic health information leaflet on influenza, and pamphlets entitled, "What You Should Know About Asian Flu" and "If Asian Flu Comes to Your Community."

Pamphlets and other educational material were also issued by others involved in this effort. The American Medical Association developed a packet of material for State and local medical societies. The American National Red Cross issued a special Asian influenza information kit to its State and local affiliates. Voluntary health agencies, professional groups, the pharmaceutical organizations, and industry distributed special bulletins, pamphlets and articles for the general public as well as for physicians, pharmacists, and other health personnel.

Speaking engagements, including formal papers and informal talks before a variety of professional and public groups, helped inform additional thousands of people. Public Health

Service officials delivered at least 23 addresses on Asian influenza from September through November, an average of about 2 each week. These were given in such major cities as New York, Boston, Philadelphia, San Francisco, St. Louis, and Chicago, and before groups ranging from local civic clubs to meetings of national voluntary and professional associations.

All of the foregoing, as well as other communications techniques, were used to perform the first of the two tasks previously mentioned, to inform the public. These techniques also served as an integral part of a sustained health education campaign. In addition, other educational measures were developed to encourage vaccination against the infection. All State health educators, for example, received guides on how to organize for local community action specifically adapted for this campaign. Health educators were assigned to the regional medical officers of the Public Health Service to work with States and communities and to conduct special surveys of local problems, needs, and attitudes.

A series of 14 radio spot announcements, 4 television announcements, and 5 newspaper advertisements in varying sizes were sent to public health educators and information personnel in all of the States and Territories for their use in local situations. In the 3-month period, 15 such mailings were completed. The materials were designed to be flexible and easily adaptable to the needs of local communities.

A great stimulus to the vaccination promotion program was a special campaign launched as a public service by the Advertising Council, Inc., in early November. Sponsored by the Public Health Service and the American Medical Association, the campaign was prepared by the voluntary task force advertising agency, Young and Rubicam, Inc. Its purpose was to carry the message of vaccination to all the newspapers and radio and television stations of the country. A kit containing four newspaper advertisements in varying sizes was shipped to all newspapers in the United States. Similar material was sent to all television and radio stations. The television spot announcements were narrated by the noted commentators, Edward R. Murrow, John Daly, and Dave Garroway.

Copies of related Advertising Council materials were sent simultaneously to State health officers and their health education staffs. Local sponsors of the messages were asked to check with their medical and public health authorities before using the advertisements in newspapers or on the air. In this way, State and local agencies were given an opportunity to participate in the campaign. Several local information and education efforts, in fact, were geared to the appearance of these ads.

In this effort, the Public Health Service had the benefit of early assistance and counsel from an ad hoc Advisory Committee on Information and Education, whose members were health educators in State and voluntary health agencies. The committee included Robert Yoho of Indiana, James Quinlivan of New York, Elizabeth Reed of Florida, Thomas Gibson of Georgia, Milton Kossack of Louisiana, and Sol Lifson of the National Tuberculosis Association. They responded generously to the request of the Public Health Service for advice on these matters and contributed substantially to the success of the program.

### **The Program's Effect**

It is pertinent at this point to ask, and attempt to answer, the questions: Was the program successful? Did it achieve its purpose "to alert but not to alarm" the Nation and to encourage people to be vaccinated? The evidence seems conclusive that the campaign did indeed achieve its objectives. Probably never before in the history of the Nation has the public become so quickly and so well informed on a matter of public health importance.

The findings of the Gallup Poll of September 23, 1957, are worth repeating in this connection. Of the adults questioned:

- 92 percent had heard or read of Asian influenza.
- 76 percent knew that there was a vaccine against the disease.
- 65 percent planned to be vaccinated.

These findings are all the more remarkable when one considers the unprecedented speed of the entire influenza development. Within less than 5 months a new strain of influenza virus was identified and isolated; a new vaccine was developed, tested for safety and effec-

tiveness, and produced in mass quantities; plans were developed and put into effect for a nationwide voluntary distribution system; millions of Americans were vaccinated; and an emergency medical care program was devised and put into effect in many local communities.

Communications paved the way for quick and effective action at every point in this development. Without a strong and active information program, the public might have floundered in ignorance and fear and there might have been uncertainty among professional groups. With it, there was a rational period of preparation and a cooperative mobilization of resources. This is not unique or even surprising. The American people, when well informed with the facts, react in this fashion.

The evidence of acceptance and understanding is clear. But was the job well done? Was too much information centralized in Washington, to the detriment of local programs? And was the entire development sensationalized beyond its public health significance either by the Service or others engaged in public information?

We believe that the answer to these questions is "No." While everything was done to alert people to the situation and to see that the information disseminated was accurate, it must be kept in mind that Asian influenza was not made into front-page news by virtue of a public information program. The story had many elements of newsworthiness: a disease of mysterious, sudden origin in a remote region, a rapid spread throughout the world, a catastrophic potentiality, and a unique scientific and industrial achievement of swift identification of a new virus strain and large-scale production of a new vaccine.

The problem was not whether to publicize the Asian influenza story. The story would have been told inevitably by the communications media because of its inherent public interest. The problem was instead to use the techniques of communication and education to let reporters, the public, and the health professions know precisely what was at stake, why action was necessary, and what kind of action

was called for by each group. And the aim was to draw each group into the national effort, as an active planner and participant.

Joint planning and joint action in the information and education effort as well as in other phases of the program were key elements in the control of Asian influenza. One of the important byproducts of this campaign has been the strengthening of relationships among

those responsible for communications programs in Federal, State, local, and voluntary health agencies. This should stand us in good stead not only in the event of future emergencies but in the conduct of information and education for continuing health services. Information is vital to health programs, and its vigorous employment will help bring closer the goal of better health for all.

## PHS Material on Influenza

The following materials prepared or issued by the Public Health Service relating to the epidemic of Asian influenza include films, publications, and articles in *Public Health Reports*.

### Film

The Epidemiology of Influenza, an updated 1950 film (16-mm., sound, black and white, 13 min.), shows the fight against influenza since the pandemic of 1918. The historical significance, behavior, and periodicity of the disease, its clinical picture, the WHO program including the establishment of look-out posts, the physician's role in reporting, and laboratory procedures are all depicted. It can be obtained on loan from the Communicable Disease Center, Public Health Service, Atlanta, Ga.

### Publications

Proceedings of the Special Conference of the Surgeon General of the Public Health Service with the State and Territorial Health Officers, August 27-28, 1957, mimeographed, available in limited quantities, without charge, from Public Inquiries, Public Health Service, Washington 25, D. C.

Public Health Monograph No. 48 (PHS Pub. No. 544), A Review and Study of Illness and Medical Care, with special references to longtime trends, by Selwyn D. Collins, 1957, 86 pp. (An extract from

this study, *Influenza in the United States, 1887-1956*, covering pages 51-74, is published as a separate.)

### Articles

The September, October, and November 1957 issues of *Public Health Reports* as well as this one carry papers on influenza:

*In the September Issue—*

Influenza Epidemic Alert, by Surgeon General Leroy E. Burney, p. 767.

Influenza Epidemics During 1951-56 With a Review of Trends, by Selwyn D. Collins and Josephine L. Lehmann, pp. 771-780.

A short report on the Asian Strain of Influenza A with a Calendar of Major Events in the 1957 Outbreaks, pp. 768-770.

*In the October Issue—*

The Philippine Influenza Epidemic of 1957, by Matthew Tayback and Arturo C. Reyes, pp. 855-860.

Testing Influenza Vaccines at NIH; Selected Steps in the Procedure To Insure Safety, Purity, and Potency (pictorial), pp. 861-864.

Pan American Cooperation on Influenza, p. 917.

*In the November Issue—*

Health Officers' Meeting on Asian Influenza, pp. 998-1000.