Florida Department of Health | August 20, 2007

PRE-PANDEMIC FLU BEHAVIOR CHANGE CAMPAIGN

FINAL EVALUATION REPORT

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A unique strategy for pan flu preparedness

In the spring of 2007, the Florida Department of Health launched a very different kind of pandemic flu preparedness effort: Instead of urging Floridians to learn more about what is an uncertain risk, the department focused on encouraging habits likely to slow the spread of a pandemic.

Research showed very little interest in pandemic information, and for those few interested, good sources of national information already existed. So the department took a social marketing approach that focused on the changing behavior rather than simply disseminating unwanted information. The goal was to promote four actions recommended by the U.S. Centers for Disease Control and Prevention – (1) washing hands often, (2) covering coughs and sneezes with a sleeve or tissue, (3) staying home when sick, and (4) stocking up in case of a pandemic emergency.

The campaign focused primarily on the three hygienic behaviors, building its core message around the social consequences of ignoring hygienic norms. "Four out of five people wash their hands after using the restroom," some of the advertising noted. "Could someone talk to the fifth guy?" Humorous television and radio spots, supported by billboards, posters and print ads in some markets, showed this proverbial "fifth guy" character disgusting peers, spreading germs, and suffering the social consequences. (See the ads at www.5thGuy.com). In addition, point-of-purchase posters and shopping cart ads were placed in grocery stores and other retail locations to urge Floridians to stock up for an emergency and included lists of what to buy to be prepared for both a hurricane and the flu. Meanwhile, separate campaigns, also focused on the outlier message and encouraging hygienic behaviors, were developed, tested and implemented in Spanish and Creole to target low acculturated Hispanics (Spanish messages) and Haitians (Creole). These were not mere translations of the English-language campaign, but messages based on the same strategy and designed specifically for these audiences.

Significant awareness despite limited exposure

The effort's $1.4 million budget and the department's desire for a truly statewide effort, covering all 10 media markets and using three languages, limited the length of the intervention to about nine weeks and the amount of media that could be purchased. Exposure was modest: Six media markets received only a low level radio buy (six weeks of 100 Total Rating Points (TRPs) a week), a handful of billboards, some limited volunteer postings (posters) and a brief earned media push. The television buy, which accounted for two-thirds of the program's media buy, was limited to six weeks in four markets, only two of which (Orlando and Tampa Bay) included the broadcast networks. This TV buy (which was supported by some outdoor and print, but no English-language radio) amounted to 1,000 TRPs total over six weeks in the two Central Florida markets and 800 TRPs on cable for Miami/Fort Lauderdale

and Tallahassee. Exposure to the Spanish and Creole campaigns was limited to billboards, radio spots, earned media and outreach of the state's only Creole television program.

A post-intervention survey (n=800), conducted in the second week after the television spots stopped running, showed significant – but not overwhelming – awareness of the campaign, an impressive finding given the limited budget for a three-language statewide campaign. About 29% of the respondents statewide – and a third of the Central Florida sample (where we tested a stronger media buy) – reported recognizing the "5th guy" brand or the "Germs are getting stronger" tag line (aided awareness).

More importantly, nearly one in five (18%) members of the sample demonstrated unaided confirmed awareness of the campaign, which means respondents not only reported seeing the advertising but also could clearly describe signature elements of the campaign. That number was also higher – 22% - in the two Central Florida markets where broadcast spots were aired. Overall, it appears the campaign's distinctive message allowed it to gain a good deal of recognition given the limited exposure and length of the intervention.

A clearer link between the target behaviors and the flu

Slight gains (4 to 6 percentage points) were made in the portion of Floridians who agreed two of the hygienic actions – hand washing and staying home when sick – could prevent the spread of the flu. (Respondents were not asked about the third hygienic behavior, covering one's mouth when sneezing or coughing). But the perceived social norms around hand-washing, covering one's mouth and staying home when sick did not emerge any closer to the actual norms than in the pre-intervention survey, and in some cases inched backward. A likely explanation is that the very existence of the campaign signaled a concern over a large amount of non-compliance, and this recognition led people to over-estimate the portion of their peers who were not engaging in these hygienic behaviors.

More people report covering coughs and staying home when sick

The campaign succeeded at many of its goals. Respondents in the post-intervention survey were more likely to report that they stayed home from work when sick all or most of the time (57% versus a baseline of 48%). Meanwhile, the average of reported hand-washing events in a single afternoon rose slightly (from 7 to 7.5), as did the percentage of the respondents who reported always covering their coughs or sneezes with a tissue (up about 1% to 54%). But the statewide data on hand washing was mixed. When asked if they always washed their hands after specific events – visiting a public restroom, using a bathroom at home, blowing one's nose – no clear trend emerged. There was a slight drop in "always" washing after a few of the events (using a bathroom, blowing one's nose), a slight gain after another (visiting a public restroom) and no significant difference in another case (coughing or sneezing). The difference may be partially explained by the very high portion of people who reported "always" washing in the pre-test (94% for hand washing after using the public restroom, for example). There was not much room for these figures to grow: Only a limited number of people admitted they did not always wash their hands in the pre-test. More consistent success in hand washing was seen in the two Central Florida markets, where one 15-second spot focused on hand washing made up the majority of spots aired and where the power of broadcast television was being leveraged. All the measures around hand washing improved in these markets. Thus, in a region where unaided confirmed awareness of the hand-washing message was four percentage points higher, the results around hand washing were as consistently positive as seen with the other behaviors statewide.

Given our limited investment in the stock-up message (posters and shopping carts only), exposure to that specific message was not measured. However, we did examine whether people reported having enough "water, groceries and medicine to last for a week in case of emergency." Overall agreement

with this statement was essentially flat, though those "strongly" agreeing rose 5%. This may be related to the campaign's timing, running at the beginning of hurricane season. Since there was a prevalence of other stock-up messages in the media (Red Cross, Volunteer Florida, the State Emergency Response Team, etc.), a correlation between campaign exposure and the stock-up behavior could not have been accurately made.

Behavior change related to campaign

To gauge whether these results are related to the campaign, comparisons were made between respondents who had been exposed to the campaign and those who were not. In almost every area, the exposed population was significantly more likely to be doing the target action than the sample as a whole. To put it another way, it appears that people exposed to the campaign are more likely to be doing the right thing than their peers.

When looking at hand washing, those exposed to the prevention campaign reported:

- Washing their hands more in a typical afternoon than those not exposed to the campaign;
- "Always" washing their hands more than those not exposed to the campaign after using a public restroom; after using the bathroom at home; after coughing or sneezing; and after blowing their nose.

Exposure to the campaign also correlated with an increase in behavior adoption for covering coughs and sneezes and staying home when sick. Those who saw the campaign also:

- Were more likely to report they covered their mouths with a tissue or sleeve when they cough or sneeze than their unexposed counterparts;
- Were less likely to report covering their coughs or sneezes with their bare hands; and
- Were more likely to report staying home from work when sick enough to have a fever, body aches or severe cough.

Conclusion

The "Fifth Guy" campaign showed great promise, as well as some hard results. Target behaviors changed, most consistently around staying home when sick and covering coughs, and these changes appear to be related to campaign exposure. The strategy behind the campaign – that a humorous normative message anchored in a hand-washing statistic could spur changes in a wide range of hygienic behaviors – appears to be working. Of course, there are limitations here – the brief nature of the campaign, the modest exposure, the possibility of other external factors. But what we know so far is promising. The key questions now revolve around how the state might leverage this new "Fifth Guy" brand they invested in creating. This may offer a longer-term payoff. Could the creative approach be applied to other outreach efforts at the state or local level? Does it make sense to invest in a more intensive Fifth Guy campaign in a specific market and see if greater results might be achieved? Should the Fifth Guy brand be incorporated more broadly into programs where hygienic behaviors are important (in hospitals for example)? The state Department of Health has clearly created a potentially powerful message. It is worth considering how this investment might be leveraged further to achieve long-term behavior change.

Florida Department of Health
Pre-Pandemic Flu Behavior Change Campaign
Evaluation Report

THE CAMPAIGN

In the spring of 2007, the Florida Department of Health set out to prepare people for the potential of a flu pandemic. But they faced a tough challenge: No pandemic on the horizon. Most Floridians doubted a pandemic was likely or threatened them personally. Research showed very little interest in pandemic information, and for those few interested, good sources of national information already existed.

So instead, the DOH launched a very different kind of pandemic flu preparedness effort. Rather than simply disseminating unwanted information or playing up the risk of an event that most Floridians doubted would ever happen, the department focused on encouraging behaviors that could serve to slow the spread of a pandemic should one occur.

The goal was to promote four actions recommended by the U.S. Centers for Disease Control and Prevention -- (1) washing hands often, (2) covering coughs and sneezes with a sleeve or tissue (not bare hands), (3) staying home when sick, and (4) stocking up in case of a pandemic emergency.

The campaign focused primarily on the three hygienic behaviors, building its core message around what does matter to people: Fitting in. Research showed four out of five people wash their hands after using the restroom. So the campaign highlighted the social consequences of being the unhygienic "Fifth Guy." Humorous television and radio spots -- supported by billboards, posters and print ads in some markets, as well as an interactive website and a MySpace page -- showed this proverbial Fifth Guy spreading germs and disgusting his peers. (See the ads at www.5thGuy.com).

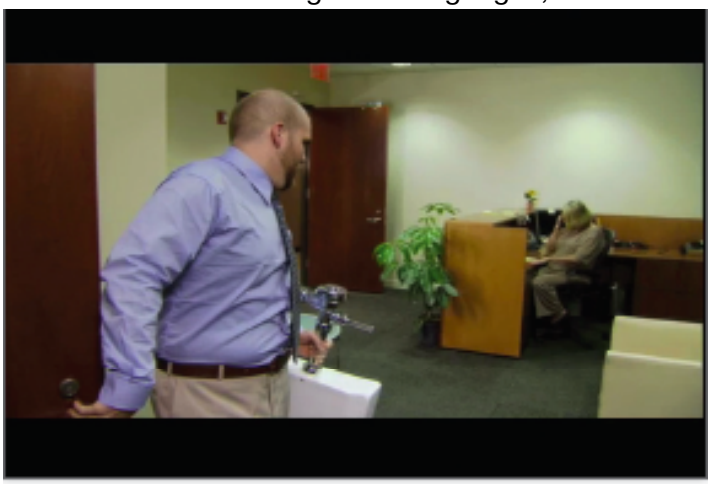
Research also showed that while Floridians doubted the likelihood of a pandemic, and therefore had little motivation to spend time or money stocking up on emergency supplies. However, there was a potential disaster they did worry about: hurricanes. So the DOH campaign piggybacked pandemic preparedness onto Floridians' greater willingness to prepare for the possibility of a catastrophic storm. Point-of-purchase posters and shopping cart ads were placed in grocery stores and other retail locations and included lists of what to buy to be prepared for both a hurricane and the flu.

Meanwhile, separate campaigns, also focused on the message of the social outlier and encouraging hygienic actions, were developed, tested and implemented in Spanish and Creole to target low-acculturated Hispanics (Spanish messages) and Haitians (Creole). These were not mere translations of the English-language campaign, but messages based on the same strategy and designed specifically for these audiences.

This report focuses on the evaluation data gathered through the pre- and post-surveys conducted by Marketing for Change, Inc. (M4C).

AWARENESS OF THE CAMPAIGN

The effort's $1.4 million budget and the department's desire for a truly statewide effort, covering all 10 media markets and using three languages, limited the length of the intervention to about nine weeks and the amount of media that could be purchased. Exposure was modest: Six media markets received only a low-level radio buy (six weeks of 100 Total Rating Points (TRPs) a week), a handful of billboards, some limited volunteer postings (posters) and a brief earned media push. The television buy, which accounted for two-thirds of the program's media buy, was limited to six weeks in four markets, only two of which included the broadcast networks. This TV buy (which was supported by some outdoor and print, but no English-language radio) amounted to 1,000 TRPs total over six weeks in the two Central Florida markets and 800 TRPs on cable for Miami/Fort Lauderdale and Tallahassee. Exposure to the Spanish and Creole campaigns was limited to billboards, radio spots, earned media and outreach of the state's only Creole television program.



Specifically, the media buy included six weeks of broadcast television in the Orlando/Daytona and Tampa/St. Petersburg markets, and five weeks of cable in Miami/Fort Lauderdale and Tallahassee. The general-market radio buy was for six weeks in six metro areas -- West Palm Beach, Jacksonville, Fort Myers/Naples, Pensacola, Gainesville/Ocala and Panama City. Spanish-language spots aired during the same period in Orlando, Tampa and Miami/Fort Lauderdale. Creole-language spots ran in Miami/Fort Lauderdale.

The outdoor campaign included billboard messages in 10 markets: Gainesville, Jacksonville, Melbourne/Brevard/Orlando, Miami/Fort Lauderdale, Orlando, Tampa Bay, Tallahassee, Panama City, Pensacola and Fort Myers. In addition, print media appeared for two weeks in the Orlando Sentinel and one week in the Tallahassee Democrat. Post-it notes promoting the campaign also ran on the front page of the Tallahassee Democrat's entire circulation.

A detailed report on the media buy can be found in Appendix A of this report.

In addition to traditional media outlets, the Fifth Guy campaign took advantage of the Internet, including video-sharing and social networking sites. The Fifth Guy has a website and a MySpace page, and the campaign's video spots are available on the campaign web site, YouTube, and other

social network and video sites. The Web site features a tongue-in-cheek online hygiene quiz designed to drive home the campaign's messages; separate pages on each target behavior; links to the associated MySpace page; downloads of campaign materials, including posters for worksites; and flash video and audio of all TV and radio spots in English, Spanish and Creole.

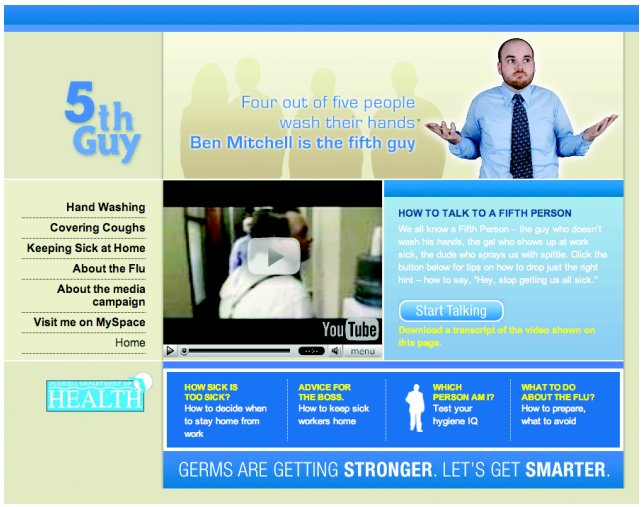
The website earned praise from broadchannel.com, which judges the most interesting new web offerings each week. It called 5thguy.com "a site that's not just catchy, but contagious." The Fifth Guy campaign's humorous approach drew viewers elsewhere online as well, including Daily Motion, Funny or Die, Google Video, Grouper, Vimeo, Vidilife, Vsocial and Yahoo.

In all, video spots targeting the three hygienic behaviors attracted more than 17,000 online views.

In addition to the media buy, a significant public relations campaign also coincided with the media blitz. News pitches, media interviews and a statewide tour of the Fifth Guy character garnered earned media attention to the overall campaign effort. The tour targeted four major regions in Florida: North Florida, Southwest Florida, Central Florida and South Florida. Over a period of four weeks, media markets in each region were visited.

During the tour, an actor portraying the Fifth Guy carried a urinal to 18 television and radio interviews across the state of Florida. A local health department professional accompanied the Fifth Guy to each interview.

In addition, print stories appeared in the Lakeland Ledger, the Fort Myers News Press and PRWeek publications, and the campaign was featured online on six websites and blogs.



The Fifth Guy also helped to promote public awareness about the hygiene campaign by visiting the highly populated downtown areas of the media markets the campaign traveled to. Carrying his signature urinal, the Fifth Guy handed out fliers that promoted better hygiene and directed people to the Fifth Guy website.

Currently, photos of the Fifth Guy in public settings are posted on the Fifth Guy MySpace page at http://profile.myspace.com/index.cfm?fuseaction=user.viewprofile&friendid=187503598. The Fifth Guy has received emails from several people who were visiting the site to view their photos with him.

Appendix B shows a specific breakdown of the public relations and earned media efforts.

A post-intervention survey (n=800), conducted in the second week after the television spots stopped running, showed significant – but not overwhelming – awareness of the campaign, an impressive finding given the limited budget for a three-language statewide campaign. About 29% of the respondents statewide – and a third of the Central Florida sample (where we tested a stronger media buy) – reported recognizing the "Fifth Guy" brand or the "Germs are getting stronger" tag line (aided awareness). Table 1 shows the specific breakdown.

Table 1: Prompted Recall

Values are in percents	*General Sample*	*Central Florida*
Overall Prompted Recall (Either Message)	28.7%	33.0%
Talk to the Fifth Guy	5.9%	9.8
Germs are getting stronger…	26.7%	29.2%

More importantly, nearly one in five (18%) members of the sample demonstrated unaided confirmed awareness of the campaign, which means respondents not only reported seeing the advertising but also could clearly describe signature elements of the campaign. That number was also higher – 22% - in the two Central Florida markets where broadcast spots were aired.

Table 2: Unaided Recall

Values are in percents	*General Sample*	*Central Florida*
Any Specific Recall	17.8%	21.6%
Specific Recall of Hand-Washing Message	12.6%	16.4%
Specific Recall of Covering Cough/Sneeze Message	3.6%	4.2%
Specific Recall of Staying Home Message	7.5%	8.0%

Overall, it appears the campaign's distinctive message allowed it to gain a good deal of recognition given the limited exposure and length of the intervention. It is our belief that a longer campaign using the same messages would increase the recall percentages.

RESULTS OF THE CAMPAIGN

The remainder of this report will focus on examining the changes, if any, of the responses observed after the conclusion of the media and public relations campaign. A summary of key numeric results can be seen in Appendix C of this report.

The gold standard of advertising recall is unaided confirmed awareness of the campaign message. As stated in the introduction, approximately one-fifth of the statewide sample was able to describe specific elements of the campaign advertising. In other cases, we found when we prompted the campaign message (i.e., *Have you heard "Talk to the fifth guy" in the last two months?*), respondents identified with the campaign. This section will further analyze the relationships between recall of campaign messages and the perceived norms and reported behaviors surrounding the three key hygienic behaviors (hand washing, covering coughs and sneezes and staying home when sick) and likelihood to stock up.

Throughout the following pages, the reader will be presented with several different percentages that vary depending on how the responses are segmented. Table 3 explains the different segmentation parameters M4C used to analyze the data:

Table 3: Results Segmentation

Terms Used	*Definitions*
Pre-Test	These are the general pre-test results
Overall Post-Test	These are the general post-test results
Overall Ad Exposure	Self-reported exposure to either advertisement or tagline – they told us they saw something
Specific Recall Hand Washing	Unaided recall of specific hand washing messages
Specific Recall Coughing/Stay Home	Unaided recall of cover coughs/stay home messages
Prompted Recall	Self-report of recall when asked if they either heard "Talk to the Fifth Guy" or "Germs are getting stronger."
Any Specific Recall	Unaided recall of any campaign message
Central Florida Specific Recall	Central Florida & unaided recall of any campaign message. This area had a concentrated media placement.

When presenting the data, those variables marked with an asterisk (*) signify that there was a statistical difference from the pre-test at the $p<0.05$ level. To gauge statistical differences, t-tests were performed for mean scores and chi-square tests were performed for ordinal variables. All of the segmentation options are presented to show how each segmentation variable effects the sample's responses.

Attitudes & Norms

While behavior change was the over-arching goal of the campaign, M4C also found it important to measure the sample's attitudes toward the issue of a pandemic outbreak and their perceived norms surrounding the hygienic behaviors targeted by the FDOH.

People tend to do what they think is normal; this is a well-researched phenomenon in the social marketing field. So, to begin the exploration, we asked people their beliefs about certain hygienic behaviors.

First, we asked, "What percentage of Americans do you think wash their hands after using the restroom?" Previous observational data have shown that approximately 80 percent do this action. In fact, this is the foundation statistic that the campaign was built on: four out of five people wash their hands, talk to the fifth guy.

Data in all segments found that people believed their fellow citizens were washing hands at a much lower rate. Overall post-test results showed that people believe roughly 48 percent were doing the action. All of the other segments believed relatively the same percentage was doing the behavior as well.

A likely explanation is that the very existence of the campaign signaled a concern over a large amount of non-compliance, and this recognition led people to over-estimate the portion of their peers who were not engaging in these hygienic behaviors. Even though we told them "four out of five people wash their hands," they still over estimated the noncompliance with hand washing.

Table 4: Hand-Washing Norms

WHAT PERCENTAGE OF AMERICANS DO YOU THINK WASH THEIR HANDS AFTER USING THE RESTROOM?	Mean	Std. Deviation
Pre-Test	48.77	21.33
*Overall Post-Test	47.70	22.57
Overall Ad Exposure	47.59	22.31
Specific Recall Hand Washing	50.20	22.14
*Specific Recall Coughing/Stay Home	42.20	18.58
Prompted Recall	49.88	23.36
Any Specific Recall	47.65	21.52
Central Florida Specific Recall	46.82	23.15

The hand-washing statistic was the only baseline statistics that we had in the campaign. None of the other behavioral variables has previous population research that we could find a comparison.

When we asked for an estimate of the percentage of Americans who wash their hands every time they cough or sneeze, we also found similar results: low percentage estimates. Looking at table 5, one can see that all of the post-test segments showed a decrease in the percentage estimates from the pre-test.

Again, an explanation for this could be the very existence of a campaign triggered the assumption that few people are actually doing the behavior. Similar findings were also seen when asking about covering coughs and sneezes with a shirt or tissue (table 6).

Table 5: Perceived hand-washing norm after cough

WHAT PERCENTAGE OF AMERICANS DO YOU THINK WASH THEIR HANDS EVERY TIME THEY COUGH OR SNEEZE?

	Mean	Std. Deviation
Pre-Test	31.07	20.97
*Overall Post-Test	27.40	18.37
*Overall Ad Exposure	28.17	18.51
Specific Recall Hand Washing	30.04	18.70
*Specific Recall Coughing/Stay Home	23.24	16.38
Prompted Recall	29.63	19.21
Any Specific Recall	29.25	19.40
*Central Florida Specific Recall	27.76	18.00

Table 6: Perceived norms around using tissue or sleeve

WHAT PERCENTAGE OF AMERICANS DO YOU THINK TYPICALLY USE A TISSUE OR THEIR SLEEVE TO COVER THEIR COUGH?

	Mean	Std. Deviation
Pre-Test	37.75	21.93
*Overall Post-Test	35.97	22.04
Overall Ad Exposure	36.98	22.13
Specific Recall Hand Washing	39.32	21.55
*Specific Recall Coughing/Stay Home	29.70	17.43
Prompted Recall	37.79	22.33
Any Specific Recall	37.66	21.32
Central Florida Specific Recall	36.61	22.30

To further support the theory that the presence of an advertisement triggers the assumption that few people are doing the hygienic action, one should study table 7. Here, we asked for the percentage of Americans who stay home when sick. While the general consensus was similar to the pre-test, those who were exposed to, and specifically recalled, the "stay home" message reported the lowest percentages of all the groups. Essentially, people who remembered the stay-home-when-sick message believed that more people went to work sick.

Table 7: Perceived norms around staying home from work

WHAT PERCENTAGE OF AMERICANS DO YOU THINK ALWAYS STAY HOME FROM WORK WHEN THEY HAVE A FEVER, BODY ACHES OR A SEVERE COUGH?

	Mean	Std. Deviation
Pre-Test	44.00	23.99
Overall Post-Test	44.45	25.01
Overall Ad Exposure	44.04	24.04
Specific Recall Hand Washing	46.65	24.14
*Specific Recall Coughing/Stay Home	39.68	27.51
*Prompted Recall	46.64	23.65
Any Specific Recall	44.28	24.80
*Central Florida Specific Recall	41.68	23.84

Since this was a campaign geared toward preventing a possible pandemic flu outbreak, M4C wanted to measure the public's perceptions of their ability to stop the spread of viruses like the flu. There was overwhelming evidence that exposure to campaign messages potentially effected the likelihood of a respondent "agreeing" that the adoption of the campaign's three hygienic behaviors – hand washing, covering coughs and sneezes and staying home when sick – could hinder the spread of viruses.

When asked specifically about hand washing, all of the post-test segments were statistically different (higher) than the pre-test responses. Table 8 shows those who admitted seeing any ad (*In the past two months, have you seen or heard any advertising about washing hands?* – Overall Ad Exposure), rated "strongly agree" more than any other group. The problem with overall ad exposure is that we do not know if the ads viewed were specific for the campaign. Potentially, a respondent could have answered "yes" to seeing a hand washing ad if they were exposed to an Ivory Soap commercial. This could be evidence that ANY commercial/PSA related to the campaign's target behaviors could trigger support for the DOH cause. When analyzing the data, one should judge "Overall Ad Exposure" as the lowest campaign measure because it is the one we know the least about.

Table 8: Belief about the efficacy of hand-washing as a way to avoid spreading flu

AGREE / DISAGREE: WASHING MY HANDS REGULARLY THROUGHOUT THE DAY CAN PREVENT THE SPREAD OF A VIRUS LIKE THE FLU.

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	*Specific Recall Coughing/ Stay Home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Strongly Agree	84.5%	92.9%	94.5%	92.6%	91.1%	93.6%	91.4%	94.2%
Somewhat Agree	12.3%	4.7%	3.5%	5.4%	4.2%	2.6%	5.9%	4.2%
Somewhat Disagree	2.2%	0.9%	1.2%	2.0%	4.7%	2.3%	2.7%	1.3%
Strongly Disagree	1.0%	1.5%	0.9%	0.0%	0.0%	1.6%	0.0%	0.3%

On the other hand, when looking at "staying home when sick" messages (table 9) and "covering coughs/sneezes" messages (table 10), specific unaided recall of the messages positively correlated with the likelihood of "strongly agreeing" that these actions can prevent the spread of the flu.

Table 9: Belief about the efficacy of staying home from work as a way to prevent flu spread

AGREE / DISAGREE: STAYING HOME FROM WORK WHEN I AM SICK CAN PREVENT THE SPREAD OF A VIRUS LIKE THE FLU.

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	*Specific Recall Coughing/ Stay Home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Strongly Agree	79.4%	84.7%	85.0%	89.2%	91.6%	82.4%	88.3%	87.1%
Somewhat Agree	15.3%	12.3%	11.6%	8.7%	3.7%	12.6%	8.6%	10.3%
Somewhat Disagree	3.2%	1.9%	2.1%	2.1%	4.7%	2.6%	2.6%	1.5%
Strongly Disagree	2.0%	1.1%	1.3%	0.0%	0.0%	2.4%	0.5%	1.0%

Table 10: Belief about the efficacy of covering cough as a way to prevent spread of flu

AGREE / DISAGREE: COVERING MY MOUTH WITH A TISSUE OR MY SLEEVE WHEN I SNEEZE OR COUGH CAN PREVENT THE SPREAD OF A VIRUS LIKE THE FLU.

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	*Specific Recall Coughing/ Stay Home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Strongly Agree	77.2%	80.8%	82.3%	85.6%	92.5%	80.8%	84.0%	86.3%
Somewhat Agree	18.3%	14.0%	13.2%	14.4%	7.5%	13.9%	15.0%	10.0%
Somewhat Disagree	4.0%	2.1%	1.4%	0.0%	0.0%	1.6%	1.0%	1.7%
Strongly Disagree	0.4%	3.1%	3.1%	0.0%	0.0%	3.7%	0.0%	2.1%

As stated in the introduction, the main reason for developing this campaign was to ward off the spread of a virus in the event of a pandemic flu outbreak. Previous focus group research found that the average person did not believe that a pandemic outbreak would affect them in the near future. To test this common theme from the initial campaign focus groups, M4C asked respondents if they were personally at risk of getting the avian or bird flu (the more popular/common name for pandemic influenza).

When looking at table 11, all of the post-test segments were statistically different than the pre-test. There was overwhelming disagreement that the respondents were in danger of a pandemic outbreak. These data reinforce FDOH's support of M4C's "unique" approach of focusing on adopting beneficial behaviors without overtly touting the risk of a possible flu epidemic.

Table 11: Risk perception around avian flu

AGREE / DISAGREE: I PERSONALLY AM AT RISK OF GETTING THE AVIAN OR BIRD FLU.

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	*Specific Recall Coughing/ Stay Home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Strongly Agree	11.4%	12.4%	14.7%	13.6%	8.7%	17.8%	12.4%	10.6%
Somewhat Agree	23.3%	17.0%	22.4%	23.1%	28.3%	19.7%	23.3%	21.8%
Somewhat Disagree	28.6%	20.0%	19.0%	16.9%	10.3%	16.0%	18.6%	22.7%
Strongly Disagree	36.6%	50.6%	43.9%	46.5%	52.7%	46.6%	45.6%	44.9%

Targeted Hygienic Behaviors

The main goal of this campaign was to encourage the adoption of certain behaviors that would inhibit the spread of a potential pandemic flu outbreak. Specifically, the campaign targeted four behaviors recommended by the U.S. Centers for Disease Control and Prevention – (1) washing hands often, (2) covering coughs and sneezes with a sleeve or tissue, (3) staying home when sick, and (4) stocking up in case of a pandemic emergency. This section will discuss each behavior separately by presenting the pre- and post-test comparisons.

Hand Washing

Rather than simply asking the question "How often do you wash your hands?" M4C decided to focus the inquiry to a typical afternoon. The reason for this was to guide the respondent into a straightforward answer without having to provide other parameters to the question. One can see in table 12 that every post-test measure showed a statistical increase from the pre-test figure. One should also notice that those respondents reporting any exposure were also higher than the general post-test.

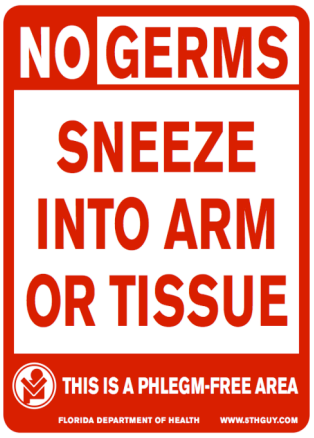


Table 12: Hand washing behavior in a typical afternoon

ABOUT HOW MANY TIMES, IF AT ALL, IN A TYPICAL AFTERNOON, DO YOU WASH YOUR HANDS?

	Mean	Std. Deviation
Pre-Test	7.00	5.18
*Overall Post-Test	7.54	7.54
*Overall Ad Exposure	8.56	9.17
*Specific Recall Hand Washing	8.78	7.31
*Specific Recall Coughing/Stay Home	8.16	5.24
*Prompted Recall	9.11	10.90
*Any Specific Recall	8.11	6.48
*Central Florida Specific Recall	8.47	7.38

M4C then followed up the initial hand washing question by asking specifically about "yesterday afternoon." This gave the respondent a definite time period – not too far in the distant past – to describe their hand washing behavior. Just as with the initial hand washing question, all post-test results showed an increase. In this case, the largest increase came from those who had unaided recall of the hand washing campaign PSA. This is evidence that those who remembered the FDOH campaign message were also more likely to wash their hands more than others in the sample. (Table 13)

Table 13: Hand washing behavior yesterday afternoon

NOW, THINKING SPECIFICALLY ABOUT YESTERDAY AFTERNOON, BETWEEN NOON AND 5 P.M., HOW MANY TIMES, IF AT ALL, DID YOU WASH YOUR HANDS?

	Mean	Std. Deviation
Pre-Test	5.41	4.41
Overall Post-Test	5.60	5.22
*Overall Ad Exposure	6.38	6.34
*Specific Recall Hand Washing	6.57	5.09
*Specific Recall Coughing/Stay Home	6.19	4.57
*Prompted Recall	6.54	7.43
*Any Specific Recall	5.82	4.31
*Central Florida Specific Recall	6.14	6.34

One thing we found out was the great variability in responses when we asked open-ended questions, specifically about hand-washing behavior. Respondent answers ranged from zero to 95 times when asked about hand washing in a typical afternoon and zero to 50 times during the previous afternoon. To combat this variability, we decided to use the self perception scale of "Always, Most of the Time, Some of the Time and Never" when gauging behavior. Since we realize, and the free report answers confirm, that people are going to vary greatly in their responses, the closed-ended scale forced the respondent to categorize their behavior into one of four groups, thus allowing us to have some

common comparisons. We understand that each respondent may have different definitions for "Most of the Time" and "Some of the Time," but the ability to cleanly report a behavioral scale more than makes up for the sacrifice in precision (not being able to get definite number answers).

When examining the statewide data on hand washing, M4C found the results was mixed. When asked if they always washed their hands after specific events – visiting a public restroom, using a bathroom at home, blowing one's nose – no clear trend emerged. There was a slight drop in "always" washing after a few of the events (using a bathroom, blowing one's nose), a slight gain after another (visiting a public restroom) and no significant difference in another case (coughing or sneezing). The difference may be partially explained by the very high portion of people who reported "always" washing in the pre-test (94% for hand washing after using the public restroom, for example). There was not much room for these figures to grow: Only a limited number of people admitted they did not always wash their hands in the pre-test. More consistent success in hand washing was seen in the two Central Florida markets, where one 15-second spot focused on hand washing made up the majority of spots aired and where the power of broadcast television was being leveraged. All the measures around hand washing improved in these markets. The following tables show the specific breakdown of each hand washing variable.

The foundation statistic used to develop the concept for this campaign was four out of five people wash their hands after using the restroom (The American Society for Microbiology observational research). As stated earlier, this was really the only outside benchmarked data used in this project. As a companion statistic, The American Society for Microbiology also found that when they asked people if they washed their hands after using a public restroom, the typical response was 95 percent of the sample stating that they "Always" washed. This was consistent with our findings when we asked the same question (table 14). Even though the pre-test results showed 94 percent stating always, every group who reported being exposed to the campaign messaged reported a rise in the "always" answers.

Table 14: Hand-washing behavior after using public rest room

HOW OFTEN DO YOU WASH YOUR HANDS AFTER USING A PUBLIC REST ROOM?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	Specific Recall Hand Washing	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	94.1%	94.5%	96.0%	100.0%	96.8%	96.2%	96.2%
Most of the time	3.1%	3.2%	2.3%	0.0%	2.6%	1.1%	2.5%
Some of the time	1.7%	2.0%	1.5%	0.0%	0.6%	1.9%	1.3%
Rarely / Never	1.1%	0.3%	0.3%	0.0%	96.8%	96.2%	96.2%

When looking at any of the hand washing behavior questions, one should be cautious about the possible personal stigma of not giving a socially acceptable answer. While this is not the case in all questions, as seen in the variability of answers between the pre- and post-test segments, M4C does believe it comes into play when questioning public restroom behavior – "What would the telephone interviewer think of me if I say that I 'never' wash my hands after leaving a public restroom?"

An interesting finding was to see the difference in responses for reported behaviors in public restrooms and bathrooms at home. Table 15 addresses the responses regarding the sample's home behavior.

Table 15: Hand-washing behavior after using personal bathroom

HOW OFTEN DO YOU WASH YOUR HANDS AFTER USING YOUR BATHROOM AT HOME?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	84.0%	86.7%	85.7%	85.6%	84.1%	87.1%	85.4%
Most of the time	9.8%	8.3%	10.3%	8.4%	10.3%	8.9%	9.2%
Some of the time	6.0%	4.9%	3.9%	6.0%	5.4%	4.0%	5.5%
Rarely / Never	0.3%	0.1%	0.1%	0.0%	0.2%	0.0%	0.0%

One may question the differences in the 90 percentile hand washing behaviors in public bathrooms and the 80 percentile behaviors at home. One can assume a person's home is cleaner – a common response in the preliminary focus groups – but health experts state that hand washing should remain consistent no matter the situation. This is a possible foray for future public information/social marketing campaigns.

As part of the survey, M4C also asked about hand-washing behavior associated with other areas besides the restroom. Since these questions were fairly uncommon and don't have the social stigma attached to them, we felt the answers probably reflected reality more than the previous responses.

When asked how often they washed their hands after coughing or sneezing (table 16) and blowing their nose (table 17), those who with unaided recall of the hand washing messages reported the greatest percentage of "always" answers. M4C feels that the variability in these answers could possibly be attributed to on major thing: logistics. It is logistically difficult for a person to wash his/her hands after every sneeze or cough. During focus groups, many of the respondents saw this as a futile request.

Table 16: Hand-washing behavior after coughing or sneezing

HOW OFTEN DO YOU WASH YOUR HANDS AFTER COUGHING OR SNEEZING?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall cough / stay home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	25.8%	27.6%	30.6%	30.4%	29.2%	28.6%	28.7%
Most of the time	28.6%	26.0%	25.5%	43.5%	25.6%	30.4%	29.4%
Some of the time	35.9%	36.9%	34.7%	14.5%	34.3%	32.1%	32.7%
Rarely / Never	9.7%	9.5%	9.2%	11.7%	10.9%	8.9%	9.3%

Table 17: Hand-washing behavior after nose blowing

HOW OFTEN DO YOU WASH YOUR HANDS AFTER BLOWING YOUR NOSE?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	Prompted Recall	Any Specific Recall	*Central Florida Specific Recall
Always	39.1%	37.8%	40.6%	41.41	38.91	38.77	41.00
Most of the Time	19.0%	19.6%	20.2%	22.56	20.02	24.66	17.610
Some of the Time	32.0%	30.1%	28.1%	28.96	28.79	29.56	28.55
Never	9.9%	12.6%	11.1%	7.07	12.28	7.01	11.84

As a quasi-control measure for hand washing, we asked respondents to report how often they took action before preparing food. There have been several national campaigns targeted at this behavior. Table 18 shows the responses to this question. Only those who could recall the FDOH campaign messages, either prompted or not, showed an increase in reported behavior.

Table 18: Hand-washing behavior before preparing food

HOW OFTEN DO YOU WASH YOUR HANDS BEFORE PREPARING FOOD?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall Hand Washing	Prompted Recall	Any Specific Recall	*Central Florida Specific Recall
Always	89.6%	89.4%	89.5%	92.3%	90.0%	90.1%	90.1%
Most of the Time	7.0%	5.2%	5.6%	3.0%	5.9%	3.0%	6.4%
Some of the Time	2.5%	4.8%	4.1%	4.7%	3.1%	6.9%	3.2%
Never	1.0%	0.6%	0.7%	0.0%	1.0%	0.0%	0.3%

Covering Coughs & Sneezes

M4C and FDOH sought not only to measure the cough and sneeze covering behaviors of the sample, but the campaign literally asked Floridians to adopt a new method of covering coughs and sneezes – with a tissue or the person's elbow. Focus groups told M4C, and FDOH data supported, that the common way to cover sneezes and coughs was with the bare hand. The problem with this is without proper hand washing, germs were likely to be spread.

First, we asked how often respondents covered their coughs or sneezes with their bare hand. Table 19 shows the responses. Those who could specifically recall the covering messages (unaided) from the campaign reported "never" doing it the most.

Table 19: Covering mouth with bare hand

HOW OFTEN DO YOU COVER YOUR MOUTH WITH YOUR BARE HAND WHEN YOU COUGH OR SNEEZE?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall cough / stay home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	23.5%	20.3%	20.4%	15.9%	20.4%	17.3%	16.1%
Most of the Time	23.4%	24.6%	19.7%	22.0%	22.1%	22.2%	22.9%
Some of the Time	43.6%	44.5%	49.6%	43.5%	51.4%	47.3%	52.2%
Never	9.5%	10.6%	10.2%	18.7%	6.1%	13.2%	8.8%

Second, as a comparative measure, we asked how often do you cough or sneeze without covering your mouth. Responses were relatively flat when comparing the "never" and "some of the time" answers in the pre- and post-test (table 20). Just as the case when asking about certain hand washing behaviors, we believe that many of the responses to this question were motivated by a socially acceptable answer.

Table 20: Coughing WITHOUT covering your mouth

HOW OFTEN DO YOU COUGH OR SNEEZE WITHOUT COVERING YOUR MOUTH?

	Pre-Test	*Overall Post-Test	Overall Ad Exposure	*Specific Recall cough / stay home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	2.4%	1.9%	2.3%	0.5%	2.3%	2.4%	1.3%
Most of the Time	3.2%	3.2%	3.4%	4.6%	4.3%	4.6%	2.9%
Some of the Time	29.6%	35.7%	33.1%	42.0%	35.1%	37.0%	36.9%
Never	64.9%	59.2%	61.2%	52.8%	58.4%	56.0%	58.9%

Finally, we asked respondents how often they used a tissue or their sleeve to cover their coughs or sneezes. Again, this is a fairly "new" behavior for most. When conducting focus groups on this subject, only one respondent out of the six groups reported using their sleeve (elbow) to cover coughs. Table 21 shows that those who had unaided recall of the covering coughs/sneezes message reported "always" and "most of the time" more than any other post-test group. Overall, exposure to the campaign messages, either unaided or prompted, did positively correlate with reports of frequent behavior execution.

Table 21: Coughing cough or sneeze with tissue or sleeve

HOW OFTEN DO YOU COVER YOUR MOUTH WITH A TISSUE OR SLEEVE WHEN YOU COUGH OR SNEEZE?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	*Specific Recall cough / stay home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	52.1%	52.9%	57.2%	60.3%	53.4%	59.3%	55.1%
Most of the Time	28.0%	22.6%	21.9%	27.1%	23.0%	24.1%	26.9%
Some of the Time	14.3%	21.7%	18.1%	12.6%	21.6%	13.6%	15.3%
Never	5.6%	2.9%	2.8%	0.0%	1.9%	3.1%	2.7%

Stay Home When Sick

The third behavior targeted in the campaign was encouraging Floridians to stay home when sick. Focus group research found that the simple concept of "sick" had many definitions; therefore, FDOH and M4C qualified sick as "sick enough to have a fever, body aches or severe cough." In addition, we found that unlike the other behaviors, self-efficacy was not the only driving force determining its adoption. A person can easily make the choice to wash his/her hands and properly cover coughs without a large impact on others. Our focus group research found that staying home when sick had a different and larger impact – money. Participants repeatedly cited "financial needs" and "family obligations" as the main reasons they went to work sick. In addition, many felt that the ability to go in while "under the weather" came with a sense of pride and accomplishment. While these are common feelings, the medical community has a different stance on staying home when sick in the event of a pandemic outbreak. Going to work sick during a pandemic could potentially fuel the spread of the virus.

Table 22 shows the responses to the question, "How often do you stay home from work when you are sick enough to have a fever, body aches or a severe cough?" The prompted recall group showed the largest increase from the pre-test with over 60 percent reporting "always" and "most of the time."

Table 22: Staying home from work when sick

HOW OFTEN DO YOU STAY HOME FROM WORK WHEN YOU ARE SICK ENOUGH TO HAVE A FEVER, BODY ACHES OR A SEVERE COUGH?

	Pre-Test	*Overall Post-Test	*Overall Ad Exposure	Specific Recall cough / stay home	*Prompted Recall	*Any Specific Recall	*Central Florida Specific Recall
Always	29.4%	34.1%	37.7%	32.2%	36.4%	33.6%	36.0%
Most of the Time	19.0%	22.5%	21.0%	24.3%	24.1%	13.8%	20.1%
Some of the Time	31.5%	27.7%	28.0%	29.0%	26.3%	33.9%	31.3%
Never	20.1%	15.7%	13.3%	14.5%	13.2%	18.6%	12.6%

Stocking Up

The final behavior targeted in the campaign was stocking-up enough family provisions to last a week in case of an emergency. Early on in our focus groups, M4C found that the average person did not see a relationship between the need to stock up supplies and their benefit during a possible pandemic outbreak.

Unlike the three previous behaviors, we did not include the stock-up messages in the broadcast media campaign. Given our limited investment in the stock-up message (posters and shopping carts only), exposure to that specific message was not measured. However, we did examine whether people reported having enough "water, groceries and medicine to last for a week in case of emergency." Table 23 shows the breakdown in responses.

Although every post-test segment was statistically different than the pre-test, overall agreement with this statement was essentially flat. This may be related to the campaign's timing, running at the beginning of hurricane season. Since there was a prevalence of other stock-up messages in the media (Red Cross, Volunteer Florida, the State Emergency Response Team, etc.), a correlation between campaign exposure and the stock-up behavior could not have been accurately made.

Table 23: Stocking up on supplies for an emergency

MY HOUSEHOLD HAS ENOUGH BOTTLED WATER, GROCERIES AND MEDICINE TO LAST FOR A WEEK IN CASE OF AN EMERGENCY.

	Pre-Test	***Overall Post-Test**	***Overall Ad Exposure**	***Specific Recall Hand Washing**	***Specific Recall Coughing/Stay Home**	***Prompted Recall**	***Any Specific Recall**	***Central Florida Specific Recall**
Strongly Agree	64.1%	66.8%	69.9%	71.6%	81.2%	73.9%	72.3%	69.9%
Somewhat Agree	18.9%	15.2%	13.6%	17.1%	3.3%	13.0%	14.0%	12.2%
Somewhat Disagree	10.3%	10.3%	8.4%	1.0%	8.5%	7.8%	4.9%	10.8%
Strongly Disagree	6.8%	7.6%	8.0%	10.4%	7.0%	5.2*	8.8%	7.1%

CONCLUSION

The “Fifth Guy” campaign showed great promise, as well as some hard results. Target behaviors changed, most consistently around staying home when sick and covering coughs, and these changes appear to be related to campaign exposure.

The strategy behind the campaign – that a humorous normative message anchored in a hand-washing statistic could spur changes in a wide range of hygienic behaviors – appears to be working. Of course, there are limitations here – the brief nature of the campaign, the modest exposure, the possibility of other external factors. But what we know so far is promising.

In almost every market, the population exposed to the Fifth Guy campaign was significantly more likely to be doing the target action – washing hands, cover coughs and sneezes, staying home when sick -- than the sample as a whole. Moreover, a greater level of success was achieved in markets with a higher level of exposure. More consistent success in hand washing, for example, was seen in two Central Florida markets in which the power of broadcast television was leveraged and the majority of spots aired focused on hand washing.

When looking at hand washing, those exposed to the prevention campaign reported:

- Washing their hands more in a typical afternoon than those not exposed to the campaign;
- “Always” washing their hands more than those not exposed to the campaign after using a public restroom; after using the bathroom at home; after coughing or sneezing; and after blowing their nose.

Exposure to the campaign also correlated with an increase in behavior adoption for covering coughs and sneezes and staying home when sick. Those who saw the campaign also:

- Were more likely to report they covered their mouths with a tissue or sleeve when they cough or sneeze than their unexposed counterparts;
- Were less likely to report covering their coughs or sneezes with their bare hands; and
- Were more likely to report staying home from work when sick enough to have a fever, body aches or severe cough.

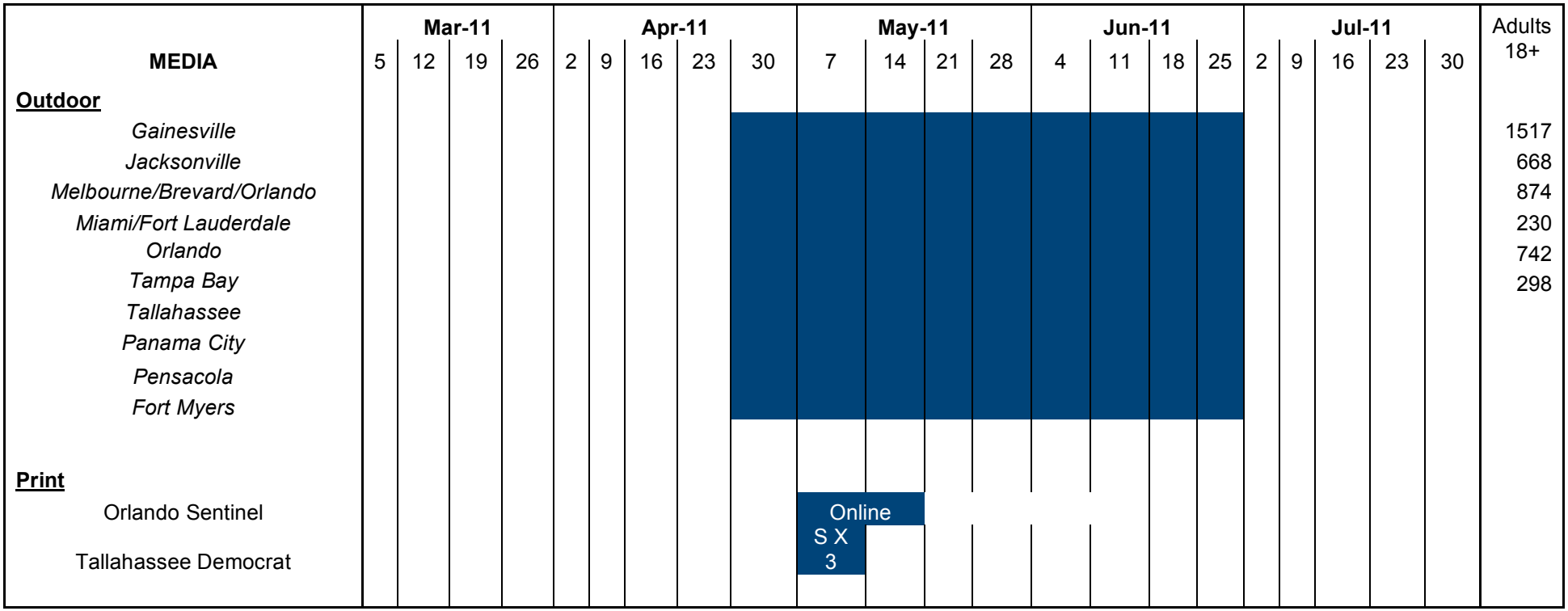
The key questions now revolve around how the state might leverage this “not just catchy but contagious” Fifth Guy brand they invested in creating. This may offer a longer-term payoff. Could the creative approach be applied to other outreach efforts at the state or local level? Does it make sense to invest in a more intensive Fifth Guy campaign in a specific market and see if greater results might be achieved? Should the Fifth Guy brand be incorporated more broadly into programs where hygienic behaviors are especially important (in hospitals for example)? The state Department of Health has clearly created a potentially powerful message. It is worth considering how this investment might be leveraged further to achieve long-term behavior change.

Appendix A

Pre Pandemic Campaign
Television & Radio Media Buy

MEDIA	Mar-11				Apr-11					May-11				Jun-11				Jul-11					Adults 18+
	5	12	19	26	2	9	16	23	30	7	14	21	28	4	11	18	25	2	9	16	23	30	
TV																							
Orlando/Daytona (Broadcast)									200	200	150		150	150	150								1000
Tampa/St. Petersburg (Broadcast)									200	200	150		150	150	150								1000
Miami/Fort Lauderdale (Cable)									200	150	150		150	150									800
Tallahassee (Cable)									200	150	150		150	150									800
Radio																							
West Palm Beach									100	100	100		100	100	100								600
Jacksonville									100	100	100		100	100	100								600
Fort Myers/Naples									100	100	100		100	100	100								600
Pensacola									100	100	100		100	100	100								600
Gainesville/Ocala									100	100	100		100	100	100								600
Panama City									100	100	100		100	100	100								600
*Orlando **Hispanic***									100	100	100		100	100	100								600
*Tampa **Hispanic***									100	100	100		100	100	100								600
*Miami/FTL **Hispanic***									100	100	100		100	100	100								600
*Miami/FTL **Haitian***									100	100	100		100	100	100								600

Pre Pandemic Campaign
Outdoor & Print Media Buy



Appendix B

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Media Strategies · Public Relations · Issues Management

PUBLIC RELATIONS & EARNED MEDIA REPORT
PRE-PANDEMIC FLU BEHAVIOR CHANGE CAMPAIGN

The Fifth Guy Hygiene campaign was launched by the Florida Department of Health (DOH), Marketing for Change (M4C), and Herrle Communications Group on May 10, 2007. The unusual public education campaign was centered on encouraging three behavioral changes which help create a healthier Florida by decreasing the spread of disease: wash hands often, stay home from work when sick, and cover a cough or sneeze with a sleeve or tissue. The American Society for Microbiology found that four out of five people wash their hands after using the restroom. That eye-opening statistic led to the creation of the humorous "Fifth Guy," that outlier of a person who fails to perform a variety of hygienic behaviors, such as washing his hands after using the bathroom.

Please find below a recap of the actions taken by Herrle Communications Group on behalf of the Florida DOH for the Fifth Guy hygiene campaign.

Press Availability – May 10th, Florida Department of Health, Tallahassee
Herrle Communications Group drafted a statewide press release for distribution by the DOH Communications Office. The release announced the details of the Fifth Guy campaign and the results of the statewide survey on hygienic behaviors, and was distributed on Thursday, May 10th. On the same day, Herrle Communications Group offered reporters in the Capital Press Corps one-on-one interviews with Dr. Bill Tynan, medical director for the Florida Office of Health Preparedness.

Herrle staff drafted and distributed a media advisory about the interview opportunity to Capital Press Corps broadcast reporters, updated the press release and campaign overview, as well as provided reporters with a copy of the commercial in the media kit. The interviews were held from 1:00-2:30 p.m. at the Florida Department of Health with Dr. Tynan, allowing reporters to obtain information about the campaign.

The following outlets took advantage of the opportunity:

- Gannett News Service, Broadcast
- WFSU-TV/The Florida Channel
- Florida Radio Networks
- Florida Public Radio

Weekly Press Release/Minority Publications

Herrle staff customized the statewide press release for distribution to more than 150 Florida weekly and minority publications across the state. The release included results from the statewide survey about the target audiences and was translated to Spanish. The releases were distributed and pitched the week of May 14th.

Editorial Visits and Opinion Editorials (Op-Eds)

The editorial board and op-ed component of the campaign was discussed during a May 3rd planning meeting with DOH, M4C and Herrle Communications Group. DOH directed Herrle not to pursue these because of the potential to shift the message away from the hygiene campaign onto legislative funding issues. DOH asked Herrle to instead use the budgeted hours for these activities towards generating additional earned media.

As a result, Herrle Communications Group promoted the campaign to Network Feed Coordinators at key TV stations. Miami physician/reporter Dr. Sean Kenniff covered the story for CBS station WFOR and the network feed coordinator pushed the story to national affiliates. As a result, we secured national media coverage on CBS affiliates across the country resulting in placement on over 110 news stations for a total of three hours and 52 minutes of news coverage for the campaign and an advertising equivalency value of $142,296. This national news coverage reached almost 4 million people according to the Nielsen Rating System.

Outreach to Stakeholders

Stakeholders identified prior to the start of the campaign were contacted the last week in April to determine their willingness to assist with the campaign. Those interested were emailed an update containing both the commercials and the website link on May 18. On June 19, they were sent information regarding the campaign posters.

Outreach to Business and Trade Associations/ Distribution of Campaign Materials

Herrle staff has reached out to the Florida Chamber of Commerce, the National Federation for Independent Business and the Florida Retail Federation to participate in the campaign. The National Federation for Independent Business agreed to assist with distribution of the campaign poster “Keep Sick @ Home.”

Herrle staff continues to reach out to a variety of entities including trade associations for distribution assistance for both the worksite poster and the bare hands poster.

Keep Sick @ Home Poster Distribution	
Organization	**Quantity**
National Federation for Independent Businesses	1,000
Florida Chamber of Commerce	N/R
Florida Retail Federation	NO
Department of Business and Professional Regulation	1,500
Department of Education	10
Capitol Building (restrooms, bulletin boards)	40
Tallahassee Chamber of Commerce	1,000
Tallahassee Society of Association Executives	500
Florida Public Relations Association	500
Publix	125
Winn Dixie	125
Florida Restaurant and Lodging Association	500
Florida Association of Realtors	N/R
Florida Institute of CPA's	NO
Agency for Workforce Innovation	NO
Department of Children and Families	N/R
Florida Association of Counties	Will make members aware of poster availability.

Bare Arm Poster Distribution	
Group	**Quantity**
Florida After School Alliance	500
Capital Area Healthy Start Coalition	500
Boys and Girls Club	250
Girl Scout Council of the Apalachee Bend	250
American Red Cross	500
The Children's Campaign	250
Hillsborough County Schools	N/R
Orange County Schools	N/R

Fifth Guy Media Tour

The Fifth Guy media tour served as an effective earned media tactic to promote the Fifth Guy Hygiene Campaign. The Fifth Guy, an actor hired by Herrle Communications Group and Marketing for Change, carried a urinal to 18 television and radio interviews across the state of Florida. A representative from Herrle Communications Group and a local health department professional accompanied the Fifth Guy to each interview.

The tour targeted four major regions in Florida: North Florida, Southwest Florida, Central Florida and South Florida. Over a period of four weeks, media markets in each region were visited.

Below is a detailed outline of the Fifth Guy Media Tour.

NORTH FLORIDA: Tallahassee/Pensacola/Panama City

Monday, May 14, 2007 – WBZE Tallahassee taped radio interview with radio personality Tammy Osborn. The 30 minute interview aired on Sunday, May 20, 2007. The Fifth Guy and Dr. Bill Tynan, the medical director for the Office of Public Health Preparedness, were interviewed.

Tuesday, May 15, 2007 – WFLA Tallahassee live radio interview with radio personality Preston Scott. The interview lasted approximately 10 minutes. The Fifth Guy and Dr. Bill Tynan were interviewed.

Tuesday, May 16, 2007 – WYCL Pensacola call in radio interview for station's website with radio personality Mark Holiday. The interview lasted approximately 10 minutes and was available for download on the WYCL website. The Fifth Guy and Trena Webb from the Escambia County Department of Health were interviewed.

Tuesday, May 16, 2007 – WILN Panama City taped call in radio interview which aired on Wednesday, May 17, 2007, on the Valentine and Ryan morning show. The interview was approximately 10 minutes; the Fifth Guy and Dr. Jason Newsom, director of the Bay County Health Department, were interviewed.

Wednesday, May 17, 2007 – WTXL Tallahassee live TV interview on the morning news broadcast. The interview was approximately 5 minutes. The Fifth Guy and Dr. Marjorie Kirsch, medical director of the Leon County Health Department, were interviewed.

Thursday, May 18, 2007 – WPGX Panama City live TV interview with Tom Najjar on the morning show "Around Town." The Fifth Guy and Dr. Jason Newsom, director of the Bay County Department of Health, were interviewed.

Monday, May 21, 2007 – WCTV Tallahassee taped interview for the morning news on Tuesday, May 22, 2007. The interview with the Fifth Guy and Dr. Bill Tynan lasted approximately 5 minutes.

SOUTHWEST FLORIDA: Tampa/St. Petersburg/Ft. Myers

Monday, May 21, 2007 – WGCU Ft. Myers live call in radio interview on Gulf Coast Live with Louis Hernandez. The Fifth Guy was interviewed for the first 30 minutes while Dr. Judith Hartner, director of the Lee County Department of Health, was present for the entire hour long segment answering caller's health questions for the last 30 minutes.

Tuesday, May 22, 2007 – WTSP Tampa Bay's 10 live TV interview for the 6 a.m. and 7 a.m. news broadcasts. Two interviews were done, each lasting approximately 6 minutes. The Fifth Guy and Dr. Douglas Holt, director of the Hillsborough County Health Department, were interviewed. The interviews were very creative and were filmed from the bathroom and kitchen of the television studio.

Tuesday, May 22, 2007 – WFLA Tampa radio taped interview. This interview was for a half hour public affairs show, "Tampa Bay Tomorrow," which aired on the evening of Saturday, May 26, 2007, during the primetime listening period. The interview was also aired on 8 other stations in Tampa during the day on Sunday, May 27, 2007. The Fifth Guy and Adlin Santiago, a nurse practitioner at the Pinellas County Department of Health, were interviewed.

Wednesday, May 23, 2007 – WFTX Ft. Myers live TV interview during the 7 a.m. and 8 a.m. morning news casts. Two interviews, lasting approximately 5 minutes each, were conducted with the Fifth Guy and Dr. Judith Hartner, director of the Lee County Department of Health.

Wednesday, May 23, 2007 – WBBH NBC 2 Ft. Myers live interview during the 4 p.m. newscast. The interview with the Fifth Guy and Dr. Judith Hartner lasted approximately 5 minutes.

Thursday, May 24, 2007 – WJPT FM Ft. Myers taped radio interview that ran on 5 stations on Sunday, May 27 and Sunday, June 3. Dr. Judith Hartner and the Fifth Guy were interviewed. The interview lasted approximately 10 minutes.

Friday, June 1, 2007 – Bay News 9 Tampa taped TV interview for Sunday, June 3 newscast. The interview lasted approximately 3 minutes and was aired once an hour for 12 hours. The Fifth Guy and Dr. Katherine Banull, Pinellas County Health Department, were interviewed.

CENTRAL FLORIDA: Orlando/Gainesville

Sunday, May 27, 2007 – WSKY Gainesville radio interview. The interview aired Sunday, June 3. The Fifth Guy and Mr. Tom Belcuore, director Alachua County Health Department, were interviewed.

Thursday, May 31, 2007 – FOX 35 Orlando taped TV interview for the Orlando Matters public affairs show which aired Saturday, June 2. The Fifth Guy and Bill Toth, Director of Epidemiology and Director of Public Information for the Orange County Health Department, were interviewed. The entire show was dedicated to health; the Fifth Guy was interviewed with Bill Toth for approximately 20 minutes, while Bill Toth was present throughout the entire program.

SOUTH FLORIDA: Miami/Ft. Lauderdale

Tuesday, June 5, 2007 – WFOR 4 CBS Miami taped interview for the 5 p.m. newscast. The segment consisted of an interview with Dr. Beverley Nelson-Curtis, Medical Executive Director Broward County Health Department, and the Fifth Guy doing skits around the office. Dr. Sean Kenniff, the host of the station's health segments, put together a package which he has submitted to the national CBS affiliate in New York.

Wednesday, June 6, 2007 – NBC 2 Ft. Lauderdale live interview on the "South Florida Today" morning show. Dr. Beverley Nelson-Curtis and the Fifth Guy were interviewed. The segment lasted approximately 5 minutes.

In addition to the broadcast stories generated from the above listed interviews, print stories appeared in the Lakeland Ledger, the Ft. Myers News Press and PRWeek. Internet based stories appeared on brandchannel.com, HoutLust (blog), scaryideas.com, oliviermermet.com, ETTF.net, and eMaxHealth.com. (Please see attached media report and clips.)

In conclusion, the Fifth Guy media tour was successful. Herrle Communications Group was able to schedule several interviews in each target region in Florida, which were not only broadcast on radio or television, but were also posted on most station's websites. Coverage of the interviews continues as most of the stations still have active links to the Fifth Guy interviews posted on their websites.

PUBLIC AWARENESS

The Fifth Guy also helped to promote public awareness about the hygiene campaign by visiting the highly populated downtown areas of the media markets we traveled to. Carrying the urinal, the Fifth Guy handed out fliers that promoted better hygiene and directed people to the Fifth Guy website.

Currently, photos of the Fifth Guy in public settings are posted on the Fifth Guy MySpace page at http://profile.myspace.com/index.cfm?fuseaction=user.viewprofile&friendid=187503598. The Fifth Guy has received emails from several people who were visiting the site to view their photos with him.

Appendix C

Evaluation Measures As Tracked in the Pre- and Post-Intervention Survey

Shown below are the intermediate and outcome measures that will be tracked through the baseline and post-intervention surveys.

Applicable Survey Data				
Measurement	*Question*	*Pre*	*Post*	*Change*
Are messages breaking through?				
Aided Awareness of messages *(Central Florida had significantly more TV exposure, so results there are shown in parentheses)*	Aided awareness of brand (Fifth Guy) or tag line ("Germs are getting smarter …")	N/A	28.7% (CF: 33.0%)	+ 28.7 % (+ 33.0%)
Confirmed unaided awareness of campaign messages *(Central Florida had significantly more TV exposure, so results there are shown in parentheses)*	Specific unaided and confirmed awareness of hand-washing message (based on open-ended question and description follow-up)	N/A	12.6 % (CF: 16.4%)	+ 12.6 % (+16.4%)
	Specific unaided and confirmed awareness of covering cough (done as above)	N/A	3.6% (CF: 4.2%)	+ 3.6 % (+4.2%)
	Specific unaided and confirmed awareness stay-home-from work messages (done as above)	N/A	7.5% (CF: 8.0%)	+ 7.5 % (+8.0%)
	Unaided and confirmed awareness of any campaign message (combination of unaided confirmed awareness measures above)	N/A	17.8% (CF: 21.6%)	+ 17.8% (+ 21.6%)
Are attitudes changing? Do people know more?				
Social norms around hand washing ↓	❑ What percentage of Americans do you think wash their hands after using the restroom?	MEAN 48.7%	MEAN 47.7%	-1.0%*
	❑ What percentage of Americans do you think wash their hands after every time they cough or sneeze?	MEAN 31.1%	MEAN 27.4%	-2.7%*
	❑ What percentage of Americans do you think wash their hands after blowing their nose?	MEAN 44.0%	MEAN 44.5%	Flat

Applicable Survey Data				
Measurement	*Question*	*Pre*	*Post*	*Change*
Social norms around covering coughs 	❏ What percentage of Americans do you think typically use a tissue or their sleeve to cover their cough?	MEAN 37.8%	MEAN 36.0%	-1.8%*
Social norms around staying home if sick 	❏ What percentage of Americans do you think always stay home from work when they have a fever, body aches or a severe cough?	MEAN 44.0%	MEAN 44.5%	Flat
Social norms around stocking up ?	○ What percentage of people in Florida do you think keep a one-week supply of water on hand in case of an emergency? ○ What percentage of people in Florida do you think keep an extra supply of tissues, water and canned soup on hand in case someone in their home comes down with the flu?	MEAN 41.2% MEAN 36.6%	No post question was asked due to competition with hurricane season stock-up messages	No Comparison Data
Self-efficacy around stocking up ?	❏ Agree/Disagree: It's easy to keep a back-up supply of bottled water, groceries and medicine that will last one week in case of an emergency. ❏ What makes it difficult to keep a back-up supply of bottled water, groceries and medicine in case of emergency?	92% Ag/SA 48% Not difficult 14% Storage space	No post question was asked due to competition with hurricane season stock-up messages	No Comparison Data
Perceived risk of sickness (related to specific behaviors) 	❏ Agree/Disagree: Washing my hands throughout the day can prevent the spread of a virus like the flu. ❏ Agree/Disagree: Staying home from work can prevent the spread of a virus like the flu. ❏ Agree/Disagree: People will stay healthier if they don't smoke cigarettes. (Asked for comparison purposes)	96% A/SA 77% SA 95% A/SA 79% SA 98% A/SA 95% SA	95% A/SA 81% SA 97% A/SA 85% SA Did not ask in post	Flat +4%* +5%* +6%* No Comparison Data

Applicable Survey Data				
Measurement	*Question*	*Pre*	*Post*	*Change*
Perceived risk of pan flu (general) ↓	❑ Agree/Disagree: I personally am at risk of getting the avian or bird flu.	35% A/SA 11% SA	29% A/SA 12% SA	-6%* Flat
Did behavior change? (Statewide – Exposed = Aided Recall)				
Hand-washing behavior (self-report) ↔	❑ About how many times, if at all, in a typical afternoon, do you wash your hands?	7.0	All / Exposed 7.5 / 8.9	All / Exposed +.5*/+1.9
	❑ Now, thinking specifically about yesterday afternoon, between about noon and 5 p.m., how many times, if at all, did you wash your hands?	5.4	All / Exposed 5.6 / 6.4	All/Exposed Flat/+1.0
	❑ How often do you wash your hands after… using a public restroom?	A 94.2% M 3.1%	All/Exposed A 94.5%/96% M 3.2%/2.3%	All/Exposed +.3%*/+1.8% +.1%*/-.8%
	❑ How often do you wash your hands after … using your bathroom at home?	A 84.0% M 9.8%	A 83.7%/85.7% M 8.3%/10.3%	-.3%*/+1.7% -1.5%*/+.5%
	❑ How often do you wash your hands after … coughing or sneezing?	A 25.8% M 28.6%	A 27.6%/30.6% M 26%/25.5%	Flat/+4.8% Flat/-3.1%
	❑ How often do you wash your hands after… blowing your nose?	A 39.1% M 19%	A 37.8%/40.6% M 19.6%/20.2%	-1.3%*/+1.5% +.6*/+1.2%
	❑ How often do you wash your hands BEFORE ... preparing food?	A 89.6% M 7%	A 89.4%/89.5% M 5.2%/5.6%	-.2*%/-.1% -1.8*%/-1.4%
Covering cough behavior (self-report) ↑	❑ How often do you cover your mouth with a tissue or sleeve when you cough or sneeze?	A 52.1% M 28%	A 52.9%/57.2% M 22.6%/21.9%	+.8*%/+5.1% -5.4*%/-6.1%
	❑ How often to you cover your mouth with your bare hand when you cough or sneeze?	A 23.5% M 23.4%	A 20.3%/20.4% M 24.6%/19.7%	-3.2*%/-2.1% +1.2*%/-3.7%
	❑ How often do you cough or sneeze without covering your mouth?	A 2.4% M 3.2%	A 1.9%/2.3% M 3.2%/3.4%	-.5*%/-.1% Flat%/+.2%

Applicable Survey Data				
Measurement	*Question*	*Pre*	*Post*	*Change*
Staying home from work when sick (self-report) 	○ How often do you stay home from work when you are sick enough to have a fever, body aches or a severe cough?	A 29.4% M 19%	All/Exposed A 34.1%/37.7% M 22.5%/21.0%	All/Exposed +4.7*%/+8.3% +3.5*%/+2%
	○ How often are you able to keep you children home from school when they have a fever, body aches or a severe cough?	A 62.9% M 16.8%	Did not ask in post	No Comparison Data
Stocking up on water, groceries and medicine (self-report) 	○ Agree/Disagree: My household has enough bottled water, groceries and medicine to last for a week in case of an emergency.	SA 64.1% A/SA18.9 %	SA66.8%/69.9% A/SA 15.2%/16.6%	+2.7*%/+5.8% -3.7*%/-2.3%
Did behavior change? (Central Florida markets – Exposed = Unaided Recall)				
Hand-washing behavior (self-report) 	❑ About how many times, if at all, in a typical afternoon, do you wash your hands?	6.9	All / Exposed 7.6/8.7	All / Exposed +.7*/+1.8
	❑ Now, thinking specifically about yesterday afternoon, between about noon and 5 p.m., how many times, if at all, did you wash your hands?	5.4	All / Exposed 5.5/6.14	All/Exposed +.1/ +.7
	❑ How often do you wash your hands after… using a public restroom?	A 93.8% M 3.6%	All/Exposed A 94.8%/96.2% M 3.5%/2.5%	All/Exposed +1%* /+2.4% -.1%*/-1.1%
	❑ How often do you wash your hands after … using your bathroom at home?	A 81.3% M 13.3%	A 86.5%/85.4% M 7.4%/9.2%	+5.2%*/+4.1% -5.9%*/-4.1%
	❑ How often do you wash your hands after … coughing or sneezing?	A 25.2% M 26.9%	A 27.3%/28.7% M 28.0%/29.4%	+2.1%/+3.5% +1.1%/+2.5%
	❑ How often do you wash your hands after… blowing your nose?	A 31.9% M 20.5%	A 37.4%/42% M 20.9%/17.6%	+5.5%*/+10.1 % +.4%*/-2.9%
	❑ How often do you wash your hands BEFORE ... preparing food?	A 89.8% M 6.7%	A 90.6%/90.1% M 6.1%/6.4%	+.8%/+.3% -.6%/-.3%

Applicable Survey Data				
Measurement	*Question*	*Pre*	*Post*	*Change*
Covering cough behavior (self-report) 	❑ How often do you cover your mouth with a tissue or sleeve when you cough or sneeze?	A 55.5% M 26.8%	A 51.7%/55.1% M 27.4%/26.9%	-3.8%*/-.4% +.6%*/+.1%
	❑ How often to you cover your mouth with your bare hand when you cough or sneeze?	A 26.0% M 21.5%	A 16.4%/16.1% M 25.5%/22.9%	-9.6%*/-9.9% +4%*/+1.4%
	❑ How often do you cough or sneeze without covering your mouth?	A 1.6% M 2.6%	A 1.4%/1.3% M 4.4%/2.9%	-.2%*/-.3% +1.8%*/+.3%
Staying home from work when sick (self-report) 	○ How often do you stay home from work when you are sick enough to have a fever, body aches or a severe cough?	A 29.7% M 17.3%	All/Exposed A 35.3%/36% M 21.0%/20.1%	All/Exposed +5.6%*/+6.3% +3.7%*/+2.8%
Stocking up on water, groceries and medicine (self-report) 	○ Agree/Disagree: My household has enough bottled water, groceries and medicine to last for a week in case of an emergency.	SA 63% A/SA 83%	SA 68% A/SA 82%	+5%* flat

KEY

 = INCREASED OVER PERIOD

 = DECREASED OVER PERIOD

 = FLAT OR CONFLICTING DATA

? = NO POST-TEST COMPARISON

CF = Central Florida markets (Tampa Bay and Orlando)

A = Always M = Most of the time A/M = Always or most of the time

Ag = Agree SA=Strongly agree A/SA = Agree or Strongly Agree

Mn = Mean

E = Self Report of Exposure to a Campaign Ad (Not Specific Recall – Aided Recall)