

ONE AND ONLY CAMPAIGN NEVADA EVALUATION OF EDUCATIONAL MATERIALS FOR INJECTION SAFETY

EXECUTIVE SUMMARY



August 31, 2010

Report created by:

Nevada Institute for Children's
Research and Policy
School of Community Health Science
University of Nevada Las Vegas

Nevada Institute For Children's Research & Policy

NICRP

This report was prepared by the Nevada Institute for Children's Research and Policy and was supported by the Nevada State Health Division through Grant Number 3U50CI000489-03S2 from the Health Resources and Services Administration. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Nevada State Health Division nor the Health Resources and Services Administration.

Authors:

Amanda Haboush, MA
Research Analyst

Tara Phebus, MA
Senior Research Analyst

Kari Wolkwitz, MPP
Research Analyst

Denise Tanata Ashby, J.D.
Executive Director

Contributors:

Sheila Clark
Graduate Assistant

Christopher Aquino
Graduate Assistant

Enrique Lopez
Assistant

About the Nevada Institute for Children's Research and Policy

The Nevada Institute for Children's Research and Policy (NICRP) is a not-for-profit, non-partisan organization whose primary goal is to advance the well-being of children in Nevada. As a research center in the School of Community Health Sciences at the University of Nevada Las Vegas, NICRP is dedicated to conducting academic and community-based research that helps guide the development of policies, practices, and programs which serve to enhance the health and well-being of children and their families. For more information about NICRP, please contact us or visit our website at <http://nic.unlv.edu>.

Nevada Institute for Children's Research and Policy
School of Community Health Sciences, UNLV
4505 S. Maryland Parkway, Box 453030, Las Vegas, NV 89154-3030
Phone: (702) 895-1040
Email: denise.tanata@unlv.edu
Web: <http://nic.unlv.edu>



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The Nevada Institute for Children's Research and Policy (NICRP), within the School of Community Health Sciences at the University of Nevada Las Vegas was contracted to conduct an evaluation of the educational print materials for the One and Only Campaign. The national Safe Injection Practices (SIP) Coalition developed the Campaign materials, in collaboration with the Centers for Disease Control and Prevention (CDC). The Campaign and its related materials were designed to promote awareness and provide education about injection safety. The materials developed by the Coalition and disseminated through this project included (materials available in Appendix A):

- **Patient Brochure** – trifold brochure which includes information about the Campaign, glossary of health terms, frequently asked questions about what are unsafe injection practices, and sample questions that patients can ask their healthcare provider regarding injection safety
- **Provider Brochure** –trifold brochures which include information about safe injection procedures, safety tips for providers, and information about the Campaign
- **Posters** – three different posters were designed for this Campaign which all include a visual message about needle and syringe reuse as well as information about the national Coalition and the One and Only Campaign.

The goal of the evaluation was to measure the effectiveness of the Campaign's educational materials in raising awareness among the general public and enhancing the knowledge of healthcare personnel. Through this measurement the evaluation results would then also provide recommendations for improvements to the materials. To achieve these goals the evaluation team at NICRP created a strategic dissemination plan designed to support a formal evaluation of messages within the materials, message delivery and general knowledge and understanding of safe injection practices by both providers and the general public. Methods utilized to conduct this evaluation included:

- Surveys of both patients and healthcare professionals collected in medical offices which frequently administer injections throughout Nevada;
- Focus groups with members of the general public (potential patients) as well as health care professionals statewide;
- An expert marketing review of campaign materials;
- A statewide telephone survey assessing public education and attitudes regarding safe injection practices; and
- A brief process evaluation of the Nevada Safe Injections Workgroup.

MEDICAL OFFICE SURVEYS

45 medical offices in both Southern and Northern Nevada were recruited to participate in the Campaign for this evaluation. Prior to disseminating Campaign materials to each office, a pre-survey was provided to gauge patients' and providers' knowledge, attitudes, and behaviors regarding injection safety. Upon completion of the pre-test phase of the evaluation, participating medical offices were provided with a supply of both patient and provider brochures, as well as posters to display in patient areas of the office. Post surveys were also distributed to the offices at this time to gauge any differences in knowledge and attitudes among providers and patients after exposure to the materials.

Patient Office Survey Results

Over 2,500 patients responded to the pre-survey. Approximately 2000 patients answered educational questions regarding safe injection practices and 98% of these patients knew that their healthcare provider should use a new needle for each injection, and 95% knew that it is NOT safe to use the same syringe used on someone else even if the needle was changed. These results revealed that most patients were aware of what unsafe injection practices were before the Campaign materials were introduced. Approximately 900 patients responded to the post-survey with similar responses to the same questions.

In addition to knowledge questions, the post-survey asked respondents questions about the Campaign materials available in the medical office. Of the 800 patients who answered post-survey questions regarding the campaign materials, less than half (40.1%) indicated that they had noticed the brochure. And slightly less than one half of patients reported that they had noticed the posters (32% for poster 1 and 49% for posters 2 and 3). Among those who did notice the materials, responses to the utility of the brochures and posters were generally positive:

- 96% reported that they found the brochure helpful and > 90% reported that they found the poster(s) helpful.
- 47% indicated that the brochure made them want to talk to their doctor about injection safety and approximately 52% elicited the same response from the posters.
 - However, on average, only 34% of these respondents reported actually talking to their doctor about injection safety.

Health Care Professionals- Office Survey Results

Approximately 380 professionals responded to the pre-survey and 200 responded to the post-survey. Overall, approximately 90% of professionals indicated that they have previously had infection control training, that their office has a designated person to oversee infection control, and that their office currently has infection control policies. This was evidenced through the three knowledge based questions included on the survey, which 95% of providers answered correctly. Additionally, almost all providers (96%) were aware of the unsafe injection practices that lead to the Hepatitis C outbreak in Southern Nevada. Additionally, approximately 60% of providers indicated that they currently discuss safe injection practices with their patients and for those to whom it applies, 91% discuss safe injection practices with their staff.

Overall, the provider brochure and the patient materials were well received by the healthcare professionals:

- 95% reported that they found the provider brochure useful in their practice and nearly all (98.8%) indicated they would share the brochure with colleagues.
- Approximately 75% reported that they found the patient materials (brochure and posters) to be useful in their practice and 93% indicated that they would distribute the brochures to patients.

FOCUS GROUPS

Seven focus groups were conducted statewide (Clark County, Elko, and Reno) for healthcare professionals (4) as well as members of the general public (3). The goal of these focus groups was to allow participants to review the Campaign materials (brochures and posters) and provide feedback regarding both content and aesthetics in the printed materials. Health care professionals

reviewed the brochure designed for professionals as well as the brochure designed for patients, while members of the general public only reviewed brochures designed for patients. Both groups reviewed all three posters.

Healthcare Professional Focus Groups

A total of 37 healthcare professionals participated in the four focus groups. The vast majority were registered nurses (>75%), followed by physicians (16%), with the remainder identified as other healthcare professionals, including physician's assistants, medical assistants, nursing students and pharmacists. These participants reviewed and provided feedback on all print Campaign materials including both brochures and the three posters.

Brochure for Professionals

Overall, the brochure for healthcare professionals was well received by professionals. However, participants provided several suggestions for improvement which included:

- Eliminating some of the text, participants indicated that the brochure was “wordy” and “repetitive”;
- Correction of a few typographical errors;
- Increasing readability by not including text where the brochure will crease; and
- Darkening the color on the inside lower panels of the brochure where the text is hard to read due to color contrast.

Brochure for Patients

The patient brochure was also well received by health care professionals. However, there were some suggestions for improvement in aesthetics as well as information and readability.

- Revise the graphics on the cover of this brochure – participants felt that pictures on the cover were unclear and they could not tell what the pictures were
- Use more bullet points for text – participants felt that the brochure may be too lengthy and could benefit from using more bullet points
- Ensure that any time an acronym or abbreviation is used that the definition is provided in the text

Posters

Health care professionals also reviewed all three Campaign posters and provided their feedback.

- Increase font size for the Campaign information on the lower portion of all three posters and reduce the amount of text. Participants found this text very difficult to read, and especially difficult from a distance.
- Offer the posters in different sizes. Participants reviewed a poster that was 11x17 inches and many felt this was too small.
- Create another poster using the “One and Only” logo as the focal point. Participants explained that a poster with only the logo would be clear, efficient, and applicable to both patients and professionals.

General Public Focus Groups

A total of 25 members of the general public participated in three focus groups to review the patient brochure and all three posters.

Patient Brochure

With regard to the patient brochure, participants provided the following suggestions in the areas of content, graphics/layout, and language:

- Limit redundancy in explanation of information;
- Utilize bulleted text more so that information is not so overwhelming or “wordy”;
- Expand the introduction section to include more recent and geographically diverse outbreak examples to better demonstrate the severity of the problem;
- Include information on resources for reporting unsafe injection practices or resources for information or testing if a person thinks he or she has been infected;
- Clarify the difference between single-dose and multi-dose vials;
- Define HIV, HBP, and CDC when first mentioned in the brochure (without abbreviations);
- Consider changing the cover of the brochure to either enhance the pictures so they are more clearly identified or use the “One and Only” logo as the cover graphic to improve clarity of the messaging; and
- Consider including the “unsafe injection practices and disease transmission” diagram from the provider brochure in the patient brochure.

Posters

Participants also provided several suggestions to improve the posters:

- Reduce description of the Campaign and Coalition on each poster so that the information is easier to understand and increase the font size;
- Consider using a different image on the pink poster that currently contains the Q-Tip image- Participants suggested using a syringe instead of the Q-tip;
- More clearly define that needles and syringes should not be reused in the phrase “some things should not be reused” on the multi-colored 4-image poster;
- Change the font color to black and use an “=” instead of a line on the 1+1+1 Poster, and
- Create a poster that uses the “One and Only” Campaign logo, which provides a clear and concise message

EXPERT MARKETING REVIEW OF MATERIALS

Marketing experts from the University of Nevada Las Vegas Greenspun School of Journalism and Media Studies reviewed the print materials and provided an expert critique. These experts felt that the materials were visually appealing and that the illustrations used were creative. They also had several suggestions for improvement in both the brochures and posters, which are detailed in the full report (see page 46).

Similar to the suggestions of participants in the focus groups, these experts suggested the creation of a fourth poster using only the Campaign logo as the graphic. In addition, the marketing experts suggested the reduction or removal of detailed information about the coalition or the campaign in the materials. Their report indicated that if the goal was to provide education and awareness about injection safety, the reader may not be as interested in the more detailed information about the

Campaign or the Coalition. This information may be better suited for the website or other more detailed materials.

CANNON PHONE SURVEY

A short questionnaire about injection safety, the need for a campaign and the best ways to disseminate health related information was created to help inform the evaluation. These questions were asked of a random sample of adults in Nevada via telephone survey. The Cannon Center for Survey Research administered these surveys 537 individuals, analyzed the data and provided a written report included in the evaluation report on page 52. Some of the findings included:

- 66.45% had previously heard of injection safety;
- 48.1% agree that injection safety is a national problem;
- 81.1% agree that a national campaign for patients is needed to make sure they know about the potential for unsafe injections in medical offices;
- 81.5% agree that a national campaign for doctors and nurses is needed to educate doctors and nurses about how to give safe injections;
- 22.9% had talked about safe injection practices with their medical provider in the past two months;
- 49.5% list their medical provider as their most trusted source for health information;
- 46.4% reported that they would tell their doctor or nurse directly if they witnessed unsafe injection practices (14.9% didn't feel that they could recognize unsafe practices); and
- 61% feel that television is the best way to deliver health messages to the public.

NEVADA WORKGROUP FOR SAFE INJECTION PRACTICES PROCESS EVALUATION

The Nevada Workgroup for Safe Injection Practices consists of approximately 45 members representing 26 organizations including NICRP and the NSHD. Of these 45 members who receive information and updates about the Campaign, 22 members were active participants in the workgroup during the pilot evaluation period (January –June 2010). Therefore in addition to the thorough evaluation of the Campaign materials, NICRP also created a short survey to assess workgroup function and satisfaction with the workgroup processes. One goal of the pilot and the Campaign is to create a working group of professionals to promote Campaign materials and injection safety in general. In June of 2010, the workgroup members were asked to complete a short survey. The survey was distributed in paper format during the June 2010 Workgroup meeting, and provided electronically for members who were unable to attend that meeting. A total of 18 workgroup members completed the survey (81% of active participants (n=22)). The survey consisted of 8 questions that assessed workgroup functioning. All 18 respondents agreed that the goals of the workgroup were clearly defined, and that the staff kept members adequately informed of workgroup activities and ways to be involved in the campaign. Overall, respondents indicated that their participation in the workgroup was worthwhile and all respondents expressed an interest in continued participation.

CONCLUSIONS AND RECOMMENDATIONS

REVISIONS TO CAMPAIGN MATERIALS

Overall, materials were well received by both health care professionals and members of the general public. Both groups felt that the information was helpful and necessary. This was consistent with the results of the telephone survey which indicated that roughly 81% of respondents felt that a national campaign about injection safety was necessary for both patients and professionals. However, the evaluation also indicates that improvements are necessary to achieve the most

effective and efficient results intended by the Campaign. Improvements to the campaign materials include:

Patient Brochure

- *CONTENT:* Text within the brochure should be reduced by inserting bullets and limiting redundancy. Clarification is also needed on some information such as the difference between single-dose and multi-dose vials. New content, such as more examples of outbreaks that better demonstrate the breadth of the problem, and resources for reporting unsafe practices should also be included.
- *LANGUAGE:* Recommendations specific to language include the revisions of typographical errors (Appendix B), and defining abbreviations the first time they appear within the brochures (HIV, HBP, and CDC) (Appendix B). There were also several recommendations to translate materials into Spanish.
- *GRAPHICS/FORMATTING:* Images contained within the brochures should be revised to improve clarity, such as the Q-Tip and Kleenex box on the front cover. Other suggested revisions include replacing all images on the cover with the “One and Only” logo to improve clarity of the messaging, and including the diagram from the provider brochure (“unsafe injection practices and disease transmission”).

Provider Brochure

- *CONTENT:* Similar to the patient brochure, text within the brochure should be reduced by inserting bullets and limiting redundancy. Clarification is also needed on information such as the difference between single-dose and multi-dose vials. New content, such as more examples of outbreaks that better demonstrate the breadth of the problem, should also be included.
- *LANGUAGE:* Recommendations specific to language included revisions typographical errors (Appendix B) and translation of materials into Spanish.
- *GRAPHICS/FORMATTING:* There are several places in the brochure where the readability is limited by the text printed on the creases of the brochure, and in places where the background color of the brochure is too light against the white text (Appendix B).

Posters

General Suggestions for All Posters:

- *CONTENT:* Text printed on the bottom section of all posters should be reduced to make the poster easier to read and understand.
- *GRAPHICS/FORMATTING:* Create a poster from the logo to increase clarity and efficiency. In addition, this poster would be more applicable to both patients and professionals. Poster should also be offered in different sizes.

Specific Poster Recommendations

Some Things Should Never Be Reused Poster

- *GRAPHICS/FORMATTING:* The overall design of this poster may want to be reconsidered as this poster was noticed less compared to the other two posters in medical offices.
- *CONTENT:* The main heading in the poster ““some things should not be reused” should be more clearly related to needles and syringes.

Pink Q-Tip Poster

- *GRAPHICS/FORMATTING:* The image of a Q-Tip on the poster may want to be

reconsidered as it may not clearly convey the message of injection safety.

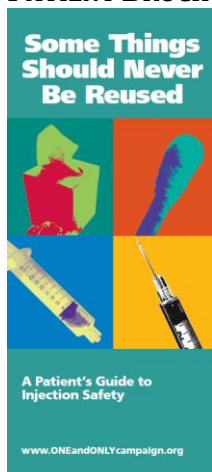
DISSEMINATION OF MATERIALS

Results from the office surveys indicate that print materials placed in offices were only seen by about 50% of the patients and providers, with only 30% actually reading the material. These results are consistent with the telephone survey in which respondents indicated that their preferred method of receiving information was via television (60%). Recommendations for improving dissemination of materials include:

- Utilizing radio and television to reach a broader audience and improve message delivery.
- Working with healthcare providers to take a more active role in distributing brochures such as including it with paperwork, verbally referring patients to the information while in waiting and exam room, or discussing the information with their patients.
- Working with leaders in the healthcare field and manufacturing companies that produce injection related equipment to distribute educational materials to healthcare providers demonstrating the shared importance and seriousness of injection safety.

ONE AND ONLY CAMPAIGN PRINT MATERIALS

PATIENT BROCHURE



PROVIDER BROCHURE



Q-TIP POSTER



1+1+1 POSTER



ANDY WARHOL POSTER - BROCHURE MATCH

