



Hepatitis C: South Asian Creative Development Research

SUMMARY OF FINDINGS

January 2009

**FOR:
COI AND THE DEPARTMENT OF HEALTH**

250 WEST END ROAD, RUISLIP, MIDDLESEX HA4 6DX, TEL: 01895 474599

Contents...

- ❑ Introduction
- ❑ Current awareness of and attitudes to hepatitis C
- ❑ Overview of responses to the campaign
- ❑ Responses to specific communications
- ❑ Summary and development pointers

1. Introduction

Background...

- ❑ Hepatitis C is a virus transmitted via blood to blood contact with someone who is infected
- ❑ There is no vaccine but chronic hepatitis C can be treated with drugs in approximately half of cases
- ❑ Whilst prevalence of hepatitis C is low amongst the general population in England, there is some indication that serious liver disease related to chronic hepatitis C could rise markedly over the next 5 – 10 years
- ❑ There are a number of transmission routes: injecting drugs, blood transfusions, infection abroad in countries of high hepatitis C prevalence, skin piecing with unsterilised needles and having unprotected sex with someone who has hepatitis C
- ❑ Many countries are known to have high hepatitis rates. Pakistanis in particular are considered an increasingly high risk group for infection. Around 2 - 3% of Pakistani born people in the UK may have the virus
- ❑ There is a need to raise awareness of hepatitis C and its prevention, diagnosis and treatment amongst Pakistanis
- ❑ A communications campaign is being developed for this community and the Department of Health commissioned research to support the creative development of the campaign

Research objectives...

- ❑ To understand responses to the current creative concepts
- ❑ More specifically, to identify:
 - Whether the campaign clearly communicates the causes, effects, treatment and prevention of hepatitis C;
 - Whether the campaign has the potential to motivate the target audience most at risk to seek a test;
 - Whether the target audience feels the campaign gives them sufficient information to avoid being infected when travelling ‘back home’;
 - Whether the campaign might create alarm within the Pakistani community resulting in people asking for tests unnecessarily

Method and sample...

- ❑ Four mini groups (5 – 6 respondents in each) conducted amongst men and women from the Pakistani community aged between 20 and 55
- ❑ Sample structure:

Mini group	Age	Location
Group 1	1 x men aged 20 - 35	Birmingham
Group 2	1 x men aged 36 - 55	London
Group 3	1 x women aged between 20 - 35	London
Group 4	1 x women aged between 36 - 55	Birmingham

- A mix of social class;
 - A mix of those born in the UK and those born abroad;
 - A mix of length of stay in the UK (i.e. more established and more recent arrivals)
- ❑ Conducted during December 2008

2. Current awareness and attitudes

There is some awareness of hepatitis in general...

- ❑ Most have some knowledge of hepatitis except a few older women
- ❑ Via a number of sources:
 - Knowledge of its high prevalence in Pakistan
 - Travel advice from nurses and GPs
 - General media
 - Personal experience/experiences of family and friends

*"I had a vaccination for hepatitis when I wanted to travel to Saudi Arabia."
(Older male)*



Hepatitis is perceived to be a risk that is part and parcel of travelling abroad and people believe they can be protected

Respondents do not necessarily see themselves as 'at risk'...

Risk of exposure is seen in the context of current situations

Relatives living in
Pakistan



Part of life:
exposed to poor hygiene,
sanitation, conditions

Those travelling
back home



People who 'don't take
the necessary
precautions'



'Not me' ∴ people find it easy to distance themselves

Most people believe they are relatively 'safe'...

- ❑ Many believe they take the necessary precautions when travelling back to Pakistan:
 - Getting vaccinated before travel
 - Taking care with hygiene, food and water when in Pakistan
- ❑ Some acceptance that they may contract hepatitis but assume there are no long term effects or they have recovered in the past

*"You just know that you don't drink the water or eat from the stalls."
(Older male)*

*"You just get the jab and make sure your kids have it before they go."
(Older female)*



This highlights a general lack of understanding of the different types of hepatitis viruses in terms of causes, symptoms, effects, treatment and prevention

Thus, people can be quite complacent ...

- ❑ Many believe:
 - Being vaccinated against one hepatitis virus protects against all
 - There are warning symptoms e.g. yellowing of the eyes, feeling ill etc.
 - They already know the risks of blood borne viruses such as HIV
- ❑ Many have recovered from/ have relatives who have recovered from hepatitis (although people cannot specify which virus contracted)



Most believe they are doing enough

Specific awareness of hepatitis C is very low...

- ❑ No real understanding that:
 - It differs from other types of hepatitis (e.g. has no symptoms)
 - Past as well as current behaviours can expose people to the risks
 - People can be hidden carriers over a long period of time



“I’ve heard about hepatitis C. You know that you have to be very careful with the drinking water in Pakistan.”
(Younger female)

“I think it affects the blood and there are three types. Type A is the most harmful and B and C are the least.”
(Younger male)

There is a great deal of misunderstanding and confusion. As a result, most have little knowledge of the potential long term serious health risks of hepatitis C or how to protect themselves

3. Responses to creative materials: overview

Overall responses to the campaign is mixed...

Overview

- ❑ The campaign does increase knowledge re: causes, effects and treatment
- ❑ However, people have to work quite hard to understand the relevance to them personally and whether they have been/are exposed
- ❑ The overall campaign idea can confuse:
 - The concept of ‘memories’ can contradict references to exposure when travelling back home *now*
- ❑ Thus, people can be unclear whether the campaign refers to past or current behaviour

People have problems assessing their own level of risk...

- ❑ Confusion regarding prevention and treatment can persist:
 - Still uncertainty regarding differences between the viruses
 - Thus, some continue to assume they can be vaccinated
- ❑ Not all are able to extrapolate the fact that hepatitis C can lie dormant over many years
- ❑ However, the leaflet is seen to go some way to address these issues



Confusion and uncertainty can persist

However, there are elements that work...

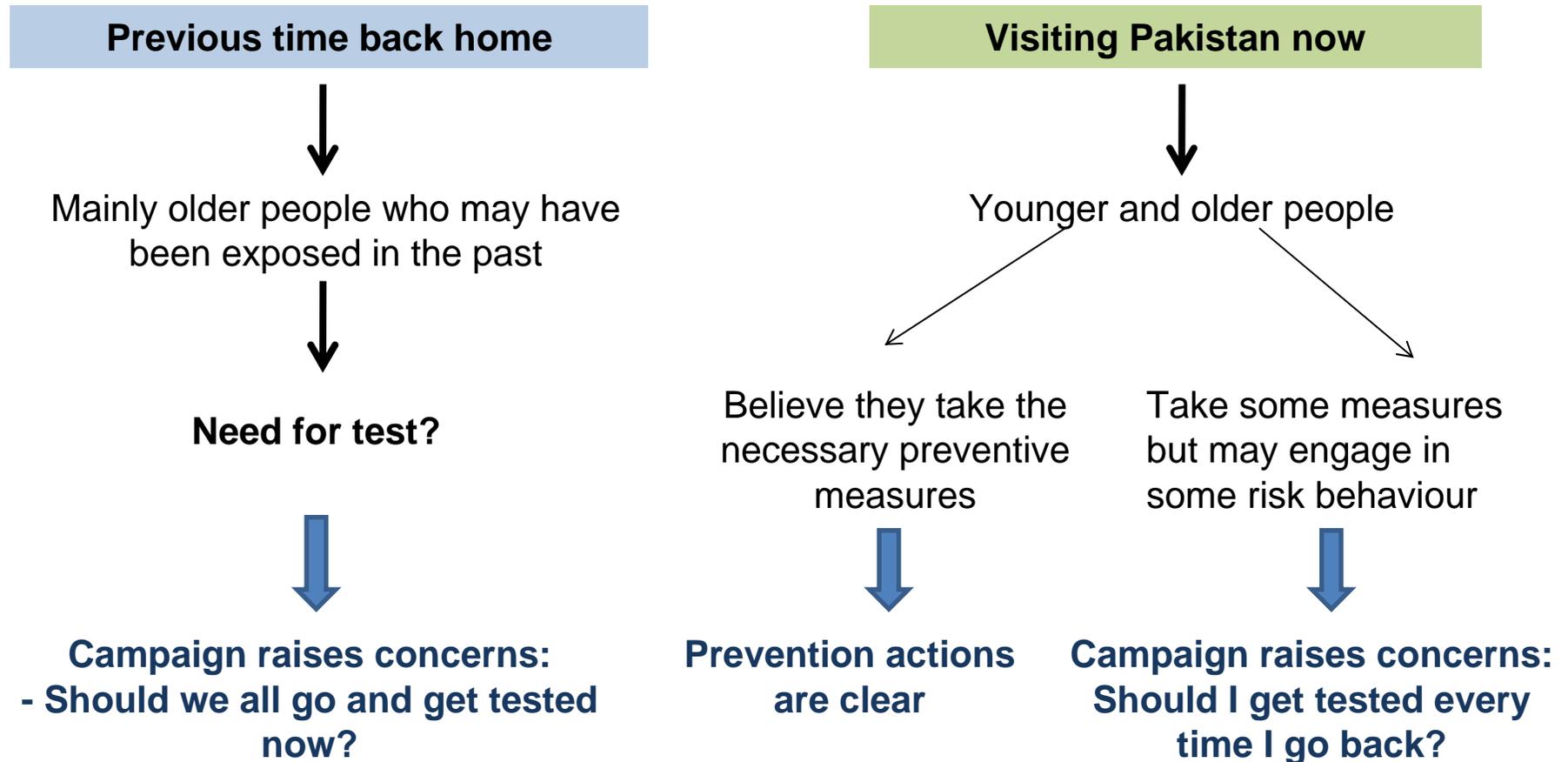
- ❑ Risk through mundane behaviours does have saliency for some of those born in Pakistan:
 - People acknowledge that they may have shared/been exposed to unsterilised equipment in the past
- ❑ For others, risks via unexpected routes (e.g. emergency treatment) does have some relevance



However, in the absence of symptoms, people are not necessarily clear about the level of risk, what actions are required and when

There is some potential to motivate but not all are sure the call to action or when...

Exposure to risks:



Thus, role of the health professional can be seen as key...

- Given current confusion and concerns, respondents can place the onus with the GP:
 - Older respondents question whether testing for hepatitis C can be done as part of screening for other things
 - Younger respondents getting travel advice feel that this is an opportunity for health professionals to raise awareness of the virus

4. Responses to specific communications materials

Press adverts ('cricket', 'wedding')...

OVERVIEW

- ❑ Both executions are generally enjoyed at an emotional level:
 - Generates nostalgia (friends and family back home)
 - Visuals are intriguing, draws people in
- ❑ It does communicate key messages re: causes, effects, treatment
- ❑ However, most people do not fully grasp references to exposure to past risks
- ❑ Also, risks conveyed are not seen as relevant now

*“The idea of sharing razors is not realistic in this day when you have things like HIV and stuff. People have become very careful. This might be more of an issue for those who might go to the barber for a shave.”
(Younger male)*

Press adverts ('cricket', 'wedding') 2...

COMMUNICATION

- ❑ Copy works well in clearly communicating:
 - What hepatitis C is (a potentially serious blood borne virus) and its causes (unsterilised equipment)
 - Where to go to for information
 - What call to action (getting a test)
- ❑ NHS logo provides credibility and gravitas
- ❑ Headlines copy (A, B, C) does convey the different viruses and the bold C can provide differentiation re: causes
- ❑ Headline copy questions do signal references to past behaviour
- ❑ However:
 - This contradicts 'while you are back home' message
 - Ear piecing is not seen as a relevant risk behaviour



Make risk of past behaviours more explicit?

Press adverts ('cricket', 'wedding') 3...

TONE & LANGUAGE

- ❑ Overall tone of voice is generally felt to be appropriate: friendly but sufficiently serious without raising panic
- ❑ Language is straightforward, easy to read
- ❑ Translated versions generally work well but a few felt the Urdu was quite 'high brow'

*"The Urdu is not comfortable reading, not like the Urdu used in newspapers."
(Older male)*

Press adverts ('cricket', 'wedding') 4...

STYLE AND VISUALS

- ❑ Cultural references (cricket, wedding) are appropriate and motivating at some levels
- ❑ The bloody razor has impact
- ❑ Black and white photo ('wedding') does generate emotional connection
- ❑ However, ear piercing visual is not seen as relevant: not what you would do before a wedding as an adult
- ❑ Visual of Dr. Zain not seen to add anything (NHS logo is sufficient)



Use visual of a woman having her ear pierced as a child? Or other risk situations?

*"In our culture we get our ears pierced when the girls are very young. It is very rare that a girl will get her ears pierced at the time of a wedding."
(Older female)*

*"It might be better if you showed a beauty parlour and the risks there. That is something you would do before a cousin's wedding."
(Older female)*

Press advert ('Hepatitis C can seriously damage your liver')...

OVERVIEW

- ❑ Generally very well received
- ❑ Direct, clear, rational messages re: hepatitis C and the causes
- ❑ Clearly about risks associated with travelling back home *now*
- ❑ Good balance of copy and visuals

*"It makes you more aware of hepatitis C. It makes you think that when you go back, you have to be more careful about the things they have mentioned. This advert tells you about the different ways you can get it."
(Younger male)*

'Hepatitis C can seriously damage...' 2

COMMUNICATION

- ❑ Direct reference to hepatitis C (headline) works: draws attention
- ❑ Clear messages around the different causes:
 - Typically felt to be relevant and appropriate (except sharing of toothbrushes)
 - Range of causes perceived to have relevance for a wider audience



Make copy at the bottom bigger/easier to read?

*"This is more scary than the others and gets you right into it. The caption catches your attention and you can see the ways you can get it. It is telling you more than just a razor. You can get it from medical equipment which makes it relevant because we often take our kids to doctors and dentists when we are in Pakistan."
(Older female)*

'Hepatitis C can seriously damage...' 3

tone & language

- ❑ Overall tone of voice is generally felt to be appropriately serious without generating anxiety
- ❑ Language is straightforward, easy to understand
- ❑ Translated versions generally work well



*"It's just clear and direct."
(Younger female)*

'Hepatitis C can seriously damage...' 4

STYLE AND VISUALS

- Visual communication of risks work well
- Colourful, powerful
- Bold, impactful image (barber)



Make visuals of other risks more prominent?

*"It is more visual and, basically you can understand how you can get the infection just by looking at the pictures."
(Older female)*

'I brought back Shalwaar Kameez...' advert

OVERVIEW

- ❑ Mixed responses
- ❑ For some, makes hepatitis C more real:
 - Case study format makes it more personal
 - Some emotional connection with Samaan, 'could be me'
 - ∴ Can draw people in/creates interest
- ❑ However, for others:
 - Messages can get lost
 - Can generate some confusion about causes

*"We all go to the barber all the time and I haven't caught anything. I don't know what they are talking about in the advert."
(Younger male)*

'I brought back Shalwaar Kameez...' advert 2

COMMUNICATION

- ❑ Reference to virus in headline can draw attention
- ❑ Copy at the bottom provides some key information
- ❑ However, messages can be confusing/ less easy to extract:
 - What has buying shalwaars got to do with hepatitis C?
 - How can one catch it from a local barber?
- ❑ Therefore, not sufficient information for some

STYLE & VISUAL

- ❑ Overall style perceived to be bold and impactful
- ❑ Images and cultural references are appropriate and relevant
- ❑ Visual of Samaan can generate impact, curiosity

'Ask Dr. Zain...'

- ❑ Mixed responses across sample
- ❑ For some, this works well:
 - Question and answer style liked: simple, direct, informative
 - NHS logo clearly conveys what this is: health advice
 - Clear and relevant causes (visual and text are liked)
 - Serious and rational tone of voice ✓
- ❑ However, for many:
 - Too wordy/detailed - can detract/reduce interest (esp. for older women)
 - Dr. Zain visual lacks credibility, does not generate trust (too young)

*"I think it's useful. There's lots of detail and it's informative."
(Older male)*

*"I don't like Dr. Zain. I don't really trust him. It looks like there would be a fee for the advice."
(Older female)*

Leaflet...

OVERVIEW

- ❑ Typically very positively received across groups
- ❑ Perceived to be very informative and comprehensive
- ❑ Clearly laid out ∴ easy to read and follow
- ❑ Question and answer format works well
- ❑ Clear targeting (although many raise question why targeting the Pakistani community only)

*“It is very clear and easy to understand and even someone who is not well educated, they will be able to read it.”
(Older female)*

Leaflet 2...

COMMUNICATION

- ❑ Clear, rational and upfront messages on:
 - What is hepatitis C, its causes and effects
 - Possible prevention and treatment
- ❑ Lack of symptoms message is particularly new, interesting and motivating:
 - Can help differentiate from other hepatitis viruses for some
- ❑ However, others feel that more explicit communication of differences could increase awareness

*“It’s really useful. There is enough information about what precautions you need to take, what is the treatment and who to contact.”
(Younger female)*

*“The most important thing it said was that there is no injection for it. Earlier, I used to think that I could get an injection for it but now I know that is only for A and B.”
(Younger male)*

Leaflet 3...

TONE & LANGUAGE

- ❑ Overall tone of voice is generally felt to be appropriately serious
- ❑ Language is straightforward, easy to understand (English version)
- ❑ However, translated version deemed not to be everyday Urdu

*“The information is good but the Urdu is not right. It’s not easy Urdu. It’s not the Urdu you get in Urdu newspapers. The font is Arabic rather than Urdu.”
(Older male)*

Leaflet 4...

STYLE AND VISUALS

- ❑ Lay out works well
- ❑ Green colour liked: connection with Pakistani flag
- ❑ However, mixed responses to the 'couple' version:
 - Some liked it but felt the couple looked too young (∴ more likely to be aware of the risks anyway)

*“The picture gives you the impression that it is for young, newly married couples. These two look like two young dutiful Muslims. I won’t pick it up because I’ll think it’s not for me.”
(Older female)*



Use an image of a family which ties in with the headline ‘ Why you and your family need...’?

TV adverts ('cricket', 'wedding')...

OVERVIEW

- ❑ Similar responses to the 'cricket' and 'wedding' press adverts
- ❑ The adverts can generate some emotional connection
- ❑ They also create confusion:
 - People do not generally understand the relevance of past behaviour to risks now
 - Few take out the fact that using unsterile equipment in the past could mean they are carriers of the virus (esp. younger, UK born Pakistanis)
- ❑ However, references to some of the wider causes are seen as potentially useful

TV adverts ('cricket', 'wedding')... 2

What Works

- ❑ Raises awareness of hepatitis C:
 - Blood borne virus
 - Can be serious but treatable
- ❑ Signposts people to the GP: first port of call
- ❑ Use of black and white and colour photos ('Wedding') – can generate emotional connection with 'back home'

What Does Not Work

- ❑ Sharing a razor: not relevant to younger men
- ❑ More relevant to older men but raises concerns (e.g. how long ago to be at risk)
- ❑ Ear piercing not a realistic scenario for women
- ❑ Doctor looks too young: can ↓ trust



Need for clearer communication:

For older people: past behaviour could mean they are carriers

For younger people: what risks could expose them to the virus when travelling back home now

Radio advert...

OVERVIEW

- ❑ Generally works well
- ❑ Appropriate cultural references (bringing back shalwaars, jewellery) – creates interest
- ❑ Clear and easy to understand messages:
 - Little confusion: conveys potential risks when travelling back to Pakistan
 - Clear call to action
- ❑ Some risks more relevant than others
- ❑ Also, can create anxiety for some: (is getting hepatitis C as easy as buying a shalwaar?)

Radio advert 2...

COMMUNICATION

- ❑ Clear, easy to understand messages:
 - Re: what it is and how it is spread
 - Where to go to for a test
 - What the common causes are
- ❑ However, unsterile medical equipment has more impact than sharing razors or toothbrushes:
 - References to visiting barbers or dental equipment could be more relevant

*“This tells you that you have to be careful . Be more aware when you travel back home.”
(Younger female)*

*“When it refers to razors or toothbrushes, no one shares these now.”
(Older male)*

TONE OF VOICE/LANGUAGE

- ❑ As with other communications, generally perceived to be appropriate
- ❑ Urdu version: clear and easy to understand

Direct mail 'Memories'...

- ❑ Concept of a photo album well received by some:
 - Novel, interesting, intriguing idea
 - 'Something free but useful'
 - Has useful and new information about hepatitis C: has potential to raise awareness:
 - Good as a reference and to share information with family
 - Cover and size works well: convenient, discreet
- ❑ However for some:
 - The idea of 'memories' is too clever
 - Lack of references to hepatitis C on cover can limit appeal
 - Some would not use

*"It's sweet and a nice idea. It's got useful information. I would read it. It is appealing."
(Younger female)*

*"It is a bit vague. It is not clear what it about. When I see this, I will take out the bits inside and put my photos in it. It doesn't indicate that it is meant to give you health information."
(Older female)*

Responses to strap lines...

'Hepatitis C. The more you know, the better.'



**Almost unanimously preferred
Direct, straightforward, easy to understand
Positive tone, leaves recipient in control**

'Know more about Hepatitis C.'



**Less motivating
Know more – why?
Reads less smoothly**

5. Summary and development pointers

Summary 1...

- ❑ Overall, the campaign has potential to raise awareness of the causes, effects, treatment and prevention of hepatitis C
- ❑ However, people still find it hard to assess their own level of risk. Confusion persists regarding:
 - The differences between the viruses
 - The treatment and prevention esp. in the absence of symptoms
- ❑ People often have to work quite hard to grasp all communication messages around risk behaviours: how exactly these relate to them personally and what action is required
- ❑ People are not always clear whether the campaign is talking about past or current behaviour and where the risks lie:
 - Some campaign routes (esp. *'cricket'* and *'wedding'*) are perceived to refer to travelling back to Pakistani now but focus on risks of previous behaviour

Summary 2...

- ❑ The causes depicted are not all felt to be appropriate (e.g. ear piercing) which can create some distancing - *'this is not for me'*
- ❑ Also, younger/more educated respondents can feel awareness of other blood borne viruses (e.g. HIV) has already made them careful about certain risk behaviours e.g. sharing razors, tooth brushes
- ❑ Older respondents:
 - Can accept they may have been exposed to the virus in the past but they are not always clear how they are affected
 - Can acknowledge that current behaviour may expose them to risks and are uncertain what they need to do and when e.g. should they be tested every time they come back from abroad?

Summary 3...

- ❑ The risks felt to be of most relevance:
 - Sharing razors in the past
 - Visiting local barbers
 - Needing emergency dental or medical treatment
- ❑ Currently, the most effective route is perceived to be '*Hepatitis C can seriously damage your liver*': clear, direct, relevant
- ❑ The leaflet is perceived to address some concerns and misunderstandings

Development pointers...

- ❑ The campaign could be made more effective by providing:
 - Greater clarity around past and current behaviours i.e. exposure in the past vs. potential exposure when travelling back now
 - More explicit communication of the fact that the virus can lie dormant over a long period of time
 - More direct messages on:
 - The absence of symptoms
 - There is no vaccine
 - People can be carriers of the virus for many years
 - Differences between the viruses
- ❑ This could help people assess their own risks, understand what specific course of action is required and when

Development pointers...

- ❑ Focusing on certain risk behaviours could be motivating and help make hepatitis C a more relevant and personal issue:
 - Barbers
 - Beauty parlours/sharing jewellery
 - Emergency medical treatment
 - Dental treatment