

Communicating High-Profile Research Results in an Ever-changing Media Environment: Lessons learned from recent HIV prevention research trials

C. Feuer(1), K. Marshall(1), D. Baron (2), D. Grant (1), M. Warren(1), A. Kagwa (1)

(1) AVAC: Global Advocacy for HIV Prevention; (2) Microbicide Media and Communications Initiative

Issues

Efficacy trials of biomedical HIV prevention interventions rarely yield straightforward, easy-to-communicate results. Yet coverage of the field is increasing in both traditional and new media.

Today's evolving online media environment poses new challenges for communicating both positive and negative results. Traditional communications planning has become an accepted and resourced part of most clinical trials, but many organizations lack adequate resources and skills to engage new media like Facebook, Twitter blogs, or even the comment sections of "traditional media." This can lead to incorrect or incomplete reporting on results that may impact the perceptions of HIV prevention research by community members, donors, government officials, policy makers and potential participants for other trials.

New media holds out a possibility of on-demand access to content any time, anywhere, on any digital device, as well as interactive user feedback, creative participation and community formation around the media content. Another important promise of new media is the "democratization" of the creation, publishing, distribution and consumption of media content. — *Wikipedia*



Case study I

The RV144 Thai Vaccine Trial

- In September 2009, investigators and sponsors for the Thai vaccine trial reported top line results of modest efficacy during a press conference in Bangkok and interviews with key global health reporters in September and fuller results at a scientific conference a month later in Paris.
- A dissemination plan, targeted mostly at traditional media, was developed that included scenario-planning and key messages.
- The announcement sparked huge media interest, including front-page stories in top-tier outlets and major broadcast stories around the world.
- Simple headlines (it worked!) were used to describe complex results (it is a scientific breakthrough, but not a public health breakthrough).
- Although the study team did not proactively engage in social media forums, the story became a trending topic on Twitter and the focus of many organic online discussions and blog posts.

Case study II

The MDP 301 microbicide trial

- On December 14, 2009, investigators and sponsors announced that PRO 2000, the microbicide being tested in the MDP 301 trial showed no protective effect. It was a particularly disappointing result since the product had shown a trend toward efficacy in an earlier trial.
- Dissemination plans were developed by the sponsors and trial sites and included advance scenario and key message development.
- The announcement, which was made via a press release and in interviews with key global health reporters, generated moderate media interest, mostly from health journalists and from reporters in the four countries where the trial had taken place (Uganda, Tanzania, Zambia and South Africa).
- There was initially limited online discussion of the results.
- Controversy erupted, however, in Zambia, while most of the sponsor and research staff were away for the December holidays.
- A blogger for the Zambia Watchdog erroneously reported, "Half of the volunteers for the clinical trial of the Microbicide Gel ... in Mazabuka are feared to have contracted HIV due to alleged failed efficacy of the drug."
- Zambia Watchdog posts sparked other online, television and radio stories in Zambia and elsewhere in Africa and kept controversy going for months.



Lessons Learned

- Incorporating online and new media outreach into your results dissemination plans is a necessity, not a luxury.
- Scenario-planning and message development in advance of results has become standard practice.
- Standing working groups composed of communications officers from all of the major organizations involved in HIV prevention research provide important forums for sharing information and experiences. These groups have helped to strengthen the field's capacity to plan ahead, which has minimized crisis situations.
- More attention needs to be paid to developing country media – online and traditional.

Recommendations

For HIV prevention research communicators:

- New media must be included when developing a media plan for results dissemination.
- Get online. Ensure trial site communications staff has uninterrupted, continuous Internet and online access, including nights and weekends.
- Engage online journalists and social media platforms well before results are due.
- Engage a range of media from trial communities and countries.
- Get comfortable with new media before you are in a crisis mode.
- Develop a communications policy that covers interaction with and reaction to new media.
- Engage online advocates (global and local) who can help you reach old and new media and respond during a crisis.
- Develop relationships with and educate key reporters and online journalists in developing countries before results are due.

Key Resource

Communications Handbook for Clinical Trials: Strategies, tips, and tools to manage controversy, convey your message, and disseminate results

This handbook provides practical guidance to clinical trial staff and research partners on how to anticipate and respond to the special communications challenges posed by the conduct of clinical research. Using context-specific case studies and practical insights culled from actual communications experience in clinical trials from around the world, this essential new resource covers the spectrum of communications planning, activities, and strategies involved in the implementation of a clinical trial. Download for free at: www.mmc-communications.org



HIV Prevention Research Communicators' Working Groups

Advocacy groups—including AVAC and GCM—have established collaborative initiatives to bring together communications officers from research groups and sponsors, advocates and investigators to create trusted spaces for sharing best practices around preparing for and communicating trial results to a range of stakeholders. These initiatives have helped to strengthen the field's capacity to plan ahead, minimizing crisis situations and proactively prepare for a range of results through scenario and communications planning. Currently, there are groups focusing on HIV vaccines, microbicides and PrEP.

In addition, the HIV/AIDS Network Coordination (HANC) project's Communications Working Group brings together communicators from HIV/AIDS clinical trials networks funded by the US NIH.

About AVAC

Founded in 1995, AVAC is an international, non-profit organization that uses education, policy analysis, advocacy and community mobilization to accelerate the ethical development and eventual global delivery of AIDS vaccines and other new HIV prevention options as part of a comprehensive response to the pandemic. Learn more at www.avac.org.



About the Microbicides Media and Communications Initiative (MMCI)

The MMCI is a unique multi-partner collaboration housed at the Global Campaign for Microbicides. It is designed to help the wider microbicides field anticipate and respond proactively to the communications challenges posed by the conduct of large-scale effectiveness trials in Africa and other resource-limited settings. Learn more at www.mmc-communications.org.