European Antibiotic Awareness Day

Toolkit for engaging in social media activities promoting prudent antibiotic use

Guidance note
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Executive summary

Concerted long-term efforts to promote prudent antibiotic use are important in turning the tide on antibiotic resistance. The success of campaigns for prudent antibiotic use in some EU countries stimulated the launch of European Antibiotic Awareness Day – a European public health initiative coordinated by the European Centre for Disease Prevention and Control (ECDC) – in 2008.

The latest data confirms that across the European Union, the number of patients infected by resistant bacteria is increasing and that antibiotic resistance is a major threat to public health. Prudent use of antibiotics can help stop resistant bacteria from developing and help keep antibiotics effective for the use of future generations.

European Antibiotic Awareness Day takes place each year around November 18 with the aim of providing a platform and support for national prudent antibiotic use campaigns. In 2008 and 2009, the European Antibiotic Awareness Day campaign focused on the use of antibiotics in primary care and developed messages and communications tools for the general population and for primary care prescribers. The objective of the European Antibiotic Awareness Day in 2010 was to support efforts at the national level to reduce unnecessary antibiotic use in hospitals through the development and dissemination of educational materials promoting prudent antibiotic use.

In 2011-2012, the focus of the campaign is on consolidating the campaign activities and achievements and providing support in terms of campaign development, implementation and evaluation. One of the activities is the development of guidance for engaging with the social media for the deployment of prudent antibiotic use campaigns.

This guidance document is based on research of social media activity related to antibiotic use at EU level, as well as on a survey of the social media activities of EAAD partner organisations, mostly EU umbrella organisations of patients and health professionals (see Appendix 2 for full list). The research showed that there is already some social media activity on prudent antibiotic use and that a few potential influencers are emerging. Similarly, the survey of the EU-wide partners of EAAD showed that respondents are becoming active on social media platforms.

Following the research and the survey, we have proposed social media activities that could be undertaken as part of national prudent antibiotic use campaigns. The proposed activities are presented in three sections that are targeting the general public, primary care prescribers and hospital prescribers.
Introduction

Setting the stage

The social media environment can be described through five major characteristics: participation (sharing information and opinion), openness (everyone can share and participate), conversation (communication to and from target audiences), community (shared interests keeping users together) and connectedness (integration of different media and platforms, sites, resources and people). Social media increasingly complements – or even replaces – traditional communication channels and shows that opening the way for the target audiences to react and interact with a campaign is an effective way to enhance campaigns.

Social media is evolving. From comments on websites or news articles to blogs and entire platforms such as Facebook or Twitter, people are increasingly participating around online content. Social media is marked by a general demand for transparency from people and institutions alike. Blogs and review services such as Tripadvisor provide an opportunity to easily express opinions about a product or a service. Social networks like LinkedIn make it clear who works for whom on which kind of projects.

Integration has always been an important concern when dealing with communications, and working with social media is no exception. This is shown on multiple levels. On a practical level, integration is about combining print materials and events with digital and social platforms into a unified whole that creates a meaningful appearance both offline and online.

Finally, a growing trend in social media is for individuals to focus on themselves even while interacting with others. Self-tracking is seen in the use of tools such as those measuring very personal information like weight, workout or sleep, and these tools have particularly flourished in online health communities such as Patients like me. The increasing number of patients/consumers who gather and access this kind of information gives rise to new levels of conversations between medical professionals, private people and current patients or carers.

The field of antibiotics is no exception to these trends. A search of relevant research revealed a few studies about antibiotics and online conversations which conclude that it is important for healthcare professionals to track and monitor the web in order to improve insights, movements and to distribute accurate information and messages. One of the studies also showed that

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1 http://quantifiedself.com/
2 http://www.wired.com/medtech/health/magazine/17-07/lbnp_knowthyself
4 http://scienceroll.com/2010/04/05/dissemination-of-health-information-through-social-networks/
especially flu and antibiotics are mentioned and that a lot of misinformation is flourishing about the treatment of flu with antibiotics\(^5\).

The proliferation of social platforms and tools along with the constant evolution of social media opens up a universe of possibilities to gain wide reach through activities ranging from simple presence to complex and wide-reaching campaigns.

**Summary of the Social Mapping of EU actors and influencers active on antibiotics**

**Objectives**

A mapping\(^6\) of the key actors in the area of social media and active on the topic of antibiotics was conducted in June 2011. The objective of this mapping was to identify best practices within the use of social media in the field of antibiotics and healthcare more broadly. The findings were divided into cases, people and platforms, and these categories served to give a broad insight into the use of social media. The social media mapping looked at the broader English language social media EU environment (and beyond) to provide some insight into how “antibiotics” and related EAAD keywords are used on social media. Furthermore, the mapping revealed interesting digital and social patterns that could be useful in designing and implementing social media campaigns on prudent use of antibiotics at the national level.

**Findings**

The research was conducted with keywords such as “antibiotic”/“antibiotics”, “antibiotic resistance”, “antimicrobial resistance” and “prudent antibiotic use”, and the results were structured into “cases”, “people” and “platforms”. The data showed that there are many examples of people (whether medical professionals or just individuals interested in the topic) discussing about antibiotics. Looking at it from an overall perspective, two tendencies were identified:

1) Social media is not yet widely used in the field of antibiotics and antibiotic resistance. However the search revealed some signs of activity, particularly among industry and patients, but also a few health professionals, with an outspoken interest in antibiotics\(^7\). While the level of activity of these actors is not high, there is potential for using social media among these actors, but also among academics and professionals where activity is still very low. This could be done by leveraging and expanding the existing platforms towards a wider public and towards medical professionals and experts.


\(^6\) The PowerPoint full report of the mapping, describing the methodology and findings, can be found in Appendix 1.

\(^7\) See Appendix 1 for more information about influencers, platforms and cases dealing with antibiotics and social media.
2) The results also showed that the general public mostly talk about antibiotics in general, rather than resistance or prudent use. By screening the conversations, three main trends were identified:

**General use:** taking antibiotics, suffering from a disease, discovering MRSA.

**Advice:** links for information and articles.

**Negative reactions:** awareness, side effects.

**Conclusions**

The main conclusion of this research is that there is great untapped potential when it comes to the use of social media to promote prudent antibiotic use. On the one hand, patients have a general interest in learning about antibiotics as they take them or contemplate taking them. On the other hand, there are initial signs of activity on the side of experts in discussing antibiotics and antibiotic resistance on social media. The need is there, and antibiotic awareness campaigns can find a fertile area on social media platforms to develop messages, raise awareness and engage with their audiences to help promote prudent antibiotic use.

**Summary of the Survey of EAAD Partners**

**Objectives**

In July 2011, a research was conducted to gain insight into the needs and challenges of the EAAD partner organisations and learn more about how ECDC can facilitate the effective use of social platforms in national antibiotic awareness campaigns.

25 organisations, key contacts of the EAAD campaign, were contacted for this exercise. Of these, 14 responded to the survey which consisted of 16 questions aimed at understanding the respondent’s knowledge of influencers, inspirational sources, and use of platforms, needs and expectations for working with social platforms.

**Outline of Findings**

Most of the respondents indicated that they are digitally aware, and that they have a website, which is frequently updated, and that they use different functions such as RSS-feeds and newsletters. 53% or respondents also stated that they also use at least one social platform – particularly Twitter, Facebook and blogs. The purpose of the respondents’ digital and social presence is mostly to provide information to others and secondly, to monitor relevant activities and to find information.

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8 The search were made for antibiotics on the social media platforms; Twitter and Facebook and the data were retrieved by [www.rowfeeder.com](http://www.rowfeeder.com/)

9 The full results of the survey, including a description of the methodology and findings, the overview of pan-European umbrella institutions contacted and the full text of the questionnaire, are available in Appendix 2.
In the survey, respondents elaborated on their concerns when it comes to the use of social media in a professional capacity. The most significant concern raised was the need for in-house skills to leverage social media effectively. Another leading concern expressed by the respondents was that communicating on social platforms is difficult to control and measure.

Conclusions

Among the respondents, social media is seen as a tool to enhance professional performance. Awareness of and attention to social media is relatively high among respondents. Most of the respondents had – to some extent – already gained experience in social media.

While the survey points towards a high level of interest in social media, respondents’ practical proficiency varies: activities reported range from monitoring to the more intensive use of platforms. While looking for inspiration on how to use social media more to achieve their organisations’ objectives, respondents also expressed concern over the resources needed for these activities.

Guidance on adapting EAAD key messages and tools for use on social media

Introduction

Based on the research conducted to identify leading platforms, communities, and people active in social media that have an interest in antibiotics and antimicrobial resistance, as well as on the feedback received from the EAAD partners and supporting organisations, this section aims to provide some guidance and ideas for how to leverage existing EAAD messages and tools in order to reach the key audiences of the campaign.

In order to engage with each EAAD target audience - general public, primary care and hospital prescribers - two possible social media activities were identified for each of these groups:
Using a mobile health tracker
Creating a Facebook page

**Primary Care Prescribers**

Using social media in an offline event
Entering the Twitter universe

**Hospital prescribers**

Developing a social media news room
Building a LinkedIn group

For each activity, we have included instructions and suggestions on how to tailor the EAAD key messages for use on social media, as well as step by step instructions on how to deploy the activities. The detailed EAAD key messages along with supporting data and evidence are available at the EAAD website\(^\text{10}\). Furthermore, Appendix 3 contains outlines of additional ideas for social media projects. In particular, for the general public one of these ideas refers to engaging with 'Mommy Bloggers'.

Due to the dynamic environment of social media, it is important to note that there is no single way of adapting the EAAD key messages for use on social platforms. Some proposed adaptations for each audience and project are highlighted in the sections below. It is important that users adapt to the platform they use and the examples below will aim to demonstrate ways to keep responding to the evolving social media environment and platforms.

\(^{10}\) [http://antibiotic.ecdc.europa.eu](http://antibiotic.ecdc.europa.eu)
Targeting the general public

Activity 1: Creating a Facebook page

Facebook cannot be overlooked in order to reach the general public. Facebook is the social media platform with the largest penetration in the world. In 2011, it reached 800 million registered users, and on average each user is connected to over 80 pages or groups.\(^\text{11}\)

The following paragraphs will demonstrate how to set up a Facebook page and how to use this platform when working with the EAAD key messages. The following approach can guide the starting, managing and optimising the presence of a prudent antibiotic use campaign on Facebook:

Some key considerations, when initially setting up your official presence on Facebook:

**Scale**: Creating a Facebook page, like most social media activities, requires regular activity and engagement online. For this purpose, you may need to decide whether time, content and resources are available to keep a dedicated campaign page up to date regularly throughout the year or whether it is more efficient to use your institutional page for occasional announcements.

**Ownership**: The administrator’s name and profile will not show up on your page, meaning you are effectively a behind-the-scenes manager. Information posted by the administrator will look like it is posted by the campaign or institution. Show the people who are behind the page, e.g. by having a photo of the person in charge along with an email address, so this person can be reached.

**Naming:** Try to make sure that the name of your page is clear, concise and properly capitalised. Facebook has Page Guidelines\(^\text{12}\) which should be consulted for further details. Once a page reaches 25 followers (or ‘likes’), then the administrator of that page can request that Facebook reserve the name of the page exclusively, so no other pages can use the same title /name\(^\text{13}\).

**Branding:** Facebook currently provides limited ability to customise pages in terms of layout and design; however campaigns can still ensure that their page is consistent with the brand and experience, for example by using the EAAD logo in and posting campaign information such as the mission and objectives, on the page.

**Access:** You can designate which page you would like visitors to arrive at, and design the page to make it welcoming and engaging. By default, the landing page is the Wall, but an increasing number of organisations and campaigns are developing custom landing pages\(^\text{14}\).

**Content:** Before activating your page, carefully consider what kind of information you want to provide, and draw up an editorial calendar that will help you time activities in the long run.

**Moderation:** Campaign managers should define appropriate and inappropriate behaviour on their pages. Developing and uploading Community Guidelines, Terms of Use or a Moderation Policy can help prevent abuse and maintain focus. These can be published on the ‘Info’ tab on your Page or as a Note\(^\text{15}\).

Having put in place the basic infrastructure of your page, then focus on making it somewhere that people will want to visit:

**Content:** make your content relevant, interesting and actionable. Do not focus overly on your own purposes of promoting key messages. Instead, provide content that adds value through information, education or entertainment. Having a close understanding of your audience’s needs and interests helps this.

A useful way to engage with the audience is to draw not only on your own content, but also to link to (and comment on) third party information – news, commentary, studies, videos, pictures etc. Also the use of videos, photos and other multimedia can bring stories to life. Pages that include

\(^\text{13}\) [https://www.facebook.com/username/](https://www.facebook.com/username/)
\(^\text{14}\) See an example here: [https://www.facebook.com/soundsofpertussis](https://www.facebook.com/soundsofpertussis)
\(^\text{15}\) See an example here: [https://www.facebook.com/psoriasis360](https://www.facebook.com/psoriasis360)
rich media have on average 19 times more fans than pages that do not. Some of the materials provided by ECDC\(^\text{16}\), for example the clips, photos, and patient leaflet can be used for this purpose.

Other details that can be added include details of events, e.g. press conferences, seminars and media launches (to develop word of mouth and community interaction) and RSS to pull content automatically from other channels e.g. Twitter, Blog or website.

Here are some examples related to adapting the key messages for use on Facebook\(^\text{17}\):


\(^{17}\) This content was pulled from a fictional Facebook page created only for the purpose of illustrating examples.
**Frequency:** It is important to make sure to keep content fresh and up-to-date. Some of the top brands on Facebook post daily, sometimes several times a day, however the majority of pages record posts once a week or every fortnight. The frequency depends equally of the availability of new information and on the time available to page administrators to keep the page up to date.

**Tone of voice:** Formal language tends not to be effective in this environment. Page administrators should make sure they speak to audiences in a manner they understand and can relate to. Speak as an individual, while being conscious of the values of your institution.

**Dialogue:** Most organisations still use social media primarily to ‘push’ information at users. Instead, they should look to encourage interaction between members of the community and encourage interaction with users. Some of these tactics include the following:

- **Responding to comments:** becoming part of the conversation by responding to comments by users.
- **Asking questions:** initiating discussions is a good way of increasing involvement amongst community members.
- **Holding polls amongst users to build involvement:** this also provides a useful way of receiving feedback on activities and materials.
- **Inviting contribution:** encouraging members of the community to comment on and upload photos and videos of their own experiences and initiatives.
- **Adding value to conversations by providing information the community may not know.**

**Be transparent:** Few organisations reveal the identities of the team members managing their Pages. To build trust, page administrators should provide contact name and email and ensure that responses to comments are identified.
Do not run away from negative comments. Tackle them – users appreciate openness and responsiveness – both of which go a long way in helping build trust. Also, deleting comments or excluding users from page is not recommended as a general rule – make sure the page guidelines are published in advance and respected uniformly.

Draw on your existing network: to promote a Facebook page, you may publicise it to email subscribers, employees and partners include a link to the page in email signatures, newsletters, brochures and websites, as well as place a prominent link or badge to it on your website.

Tell opinion-formers: Inform journalists, bloggers and other relevant stakeholders about your Page and invite them to join and participate. These can include leading doctors, hosts of health TV shows, medical professionals in politics and microbiologists. They can also include non-related personalities (e.g. politician, stars, and sports personalities). Encourage your stakeholders and users to be active on the page.

Promote on related Pages: Participate in conversations on pages related to your campaign, institution or to antibiotics, and make sure to add value to that conversation (otherwise you will be seen as spamming) before providing a link to your own page.

Integrate: do not treat Facebook as an island – it should be a core component of your broader online presence.

Optimise content: If your page is open to public search, then look to integrate the campaign branding and keywords that users are likely to use to find your content into the page information.

Advertise: Facebook ads allow you to advertise websites, pages and events. If you are familiar with Google Adwords, the system for building and running ads on Facebook is very similar (it is based on a selection of key audience, language, and geographical location, number of displays and time span of the adverts). Advertising is the point where the campaign page will require dedicated funds.
You can track and measure the success of your Facebook page in the following ways:

Facebook provides page owners with Facebook Insights, a free dashboard that enables you to track user growth and demographics, consumption of content and creation of content. Data is updated every 24 hours. A number of third party analytics services also provide Facebook tracking tools\(^\text{18}\). When using Facebook insights there are several interesting issues to consider:

**Fans:** the number of page fans (and the number of fans of your competitors’ pages).

**Demographics:** the number of fans of a given age range/gender.

**Geography:** the number of fans per country.

**Page Views:** the number of times your page has been viewed by fans.

**Total Interactions:** the total number of comments, Wall posts, and likes.

**Interactions per Post:** the average number of comments, Wall posts, and likes generated by each piece of content you post.

**Media Consumption:** the number of photo views, audio plays, and video plays your content has received.

**Unsubscribers:** You can see how many who have ‘unliked’ your page, and you can also see how many have hidden your updates.

Over time, many things can happen on and around Facebook. Lately Facebook has gone through some major changes with the way people and pages connect and interact. There are many online

\(^{18}\) Examples could be: Klout, Socialmention
sites that quickly give advice and instructions on how to benefit from Facebook’s development; Mashable is one of the leading platforms.

**Analyse data:** When the Facebook page is up and running it is important to look out for any interesting statistical data. An example could be the identification of the Facebook page users who always respond to your wall posts. Make sure they are involved and recognised for their engagement.

**Update:** Facebook changes all the time, and it is important to be aware of updates, new features and possibilities. It is one of the hardest disciplines – to keep up with the development of Facebook.

**Integrate:** Continuously think about how other platforms, features and services can be integrated.

**Get inspiration:** Many inspiring Facebook pages exist. Find some and follow those in order to get inspired and get great ideas.

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**Some additional considerations when using this platform**

The potential to target, reach and engage with huge numbers of people, both on Facebook itself, but also in a broader digital perspective, is vast. However, there are also challenges:

**Control:** Organisations (public or private alike) cannot control Facebook discussions and their impact. People who have different ideas are as free to use your page as anyone else – and criticism of your initiative is bound to appear eventually. Do not try to remove posts that go against your messages or express negative opinions, and be transparent about page moderation.

**Relevance:** Why would people want to join your page and contribute to it, when they are mostly online to talk with their friends, family and work colleagues?

**Resources:** A Facebook page requires constant feeding with content, interactions with users, management of conversations.

**Skills:** As shown in the survey of EAAD partners, many organisations do not have the in-house skills to manage Facebook pages/communities. Building these skills mainly requires time investment.

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21 Additional links can be found in Appendix 1.
Costs: It takes time, effort and sometimes budget to make a Facebook page successful. While creating a Facebook page is free of charge, it will take some time to define the scope, create content and maintain the page. Further, there can be some additional financial costs when incorporating advertisement or applications.

Activity 2: Integration of campaign website with a mobile platform

Simple text messages\(^{22}\) are widely used today as a channel to communicate about healthcare. The next step from text is the development of applications (APP) or mobile optimised websites (MOW). These serve essentially the same purpose of bringing internet based information to mobile devices; however there are significant differences which will be discussed later in this section. For this activity, we will focus on mobile optimised websites rather than the development of applications as the first step to engage with mobile users.

\[\text{An example of a regular website and a mobile optimised website}\]\(^{23} 24\)

Communication through mobile optimised websites provides an excellent platform for communicating with the general public. Although mobile devices are just another means of

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\(^{21}\) A full description of the method can be found in Appendix 2 in the back of this document.

\(^{22}\) CDC’s document: “The Health Communicator’s Social Media Toolkit” contains a short section about Mobile Health, however most focus is on text messaging practice; http://www.cdc.gov/healthcommunication/ToolsTemplates/SocialMediaToolkit_BM.pdf

\(^{23}\) http://www.healthline.com/

connecting to the (same) internet, the term has been given a stand-alone status because of the mobile aspect – it enables mobile health on the go and opens up for an enormous new way of communicating key messages. Smartphones allow people to do all sorts of business, including their shopping or searching or paying for services, at any given time and place – thereby removing the need for them to sit in front of their computers.

There is no doubt that the future of mobile health has tremendous potential, nevertheless it can be difficult to navigate this technical field. When optimising a website, for example a campaign website on prudent antibiotic use, to be displayed and used on a mobile phone, there are some aspects that need to be taken into consideration. Below are four steps that can be used for inspiration in order to start working with mobile optimised websites. The social aspect of these activities will be reflected in the choice of ideas and activities.

Below are the key considerations in building a mobile optimised website.

**Identify:** In this step there are both internal and external objectives to identify. From the internal perspective, it is important to analyse the traffic on your website and see how much already

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25 This project description will not cover the technical requirements that are needed in this matter. But it is recommended to seek help for the actual platform development, design and security, choose of operating systems, maintenance and future development.
comes from mobile devices. Google Analytics\textsuperscript{26} is the best known free tool for web analytics, and it is also able to show how much traffic is generated from mobile devices.

From an external perspective, it is important to identify and research the mobile optimised websites that are used by other health-related portals. If interesting mobile optimised websites are identified, then it is a good idea to benchmark these in order to identify how improvements and modifications could be made to your existing website.

\textbf{Develop:} This part of the process will in most cases require professional and technical support. However there are a few websites that help you to develop a mobile optimised website with little to no knowledge of HTML and CSS. Mobify\textsuperscript{27} is a website that guides you through the development process and we would recommend for you to review the guidance on this site before seeking professional help.

\textbf{Content:} The EAAD key messages targeting the general public cover “Antibiotics won’t work in the case of colds and flu”, “How should I take antibiotics responsibly?” and general messages about “Keeping antibiotics effective is everyone’s responsibility”. All of these messages are suitable for display on a mobile optimised website, however we would suggest that the content be shortened for display on a smaller mobile screen and adapted to a single-column format.

Treat your cold without antibiotics:

This theme could include ideas for treatments and tips

Take antibiotics responsibly:

Inform about procedures, side effects and how to handle remaining medicine.

Join a shared cause:

26 \url{http://www.google.com/intl/en_uk/analytics/}
27 \url{http://mobify.com}/ Here are some other suggestions: \url{http://www.mofusepremium.com/}
\url{http://www.wirenode.com/} \url{http://www.zinadoo.com/}
Facilitate sharing functions in order to ‘spread the word’.

Extra content: There are many interesting features that can be used to draw attention to your mobile optimised website. A suggestion could be to highlight where activities relating to your awareness raising campaign, such as seminars, launch events or the distribution of campaign materials, are happening through using location-based platforms. Foursquare is one option that we would recommend. In Appendix 3, you can read more about geolocation services. Or consult ‘Foursquare for Non-Profits’ to read more about this online.

Promote: The first step in order to promote the mobile optimised website is to ensure consistent branding. If the main website, the screensavers, the visual layout, and the print material support each other and satisfy all demands, then the general public will be more likely to come across the key messages and materials of the campaign.

Other features that can be used to generate traffic to your mobile optimised website include QR Codes, two-dimensional barcodes that contain information. People can download a scanner to their smartphone and use this application to decipher the information in it, most often redirecting the smartphone browser to a specific website. QR codes can easily be made online using a simple web-based tool. This QR code will take you to ECDC’s website for EAAD:

Go to APP Store or Android Marketto download a QR reader  
Scan the code
You are now taken to the EAAD website

Some additional considerations before deciding if a mobile optimised website or an application is most appropriate to meet your campaign needs: The difference between mobile applications and

28 Other geo location based platforms could be Gowalla and Facebook Places.
29 https://foursquare.com/business/brands/usecases/nonprofits
31 http://www.mobile-barcodes.com/qr-code-software/
mobile optimised websites\textsuperscript{32} include primarily issues relating to the operating systems, user experience and costs. The main differences are outlined below and can be taken into account when deciding on a MOW or an APP:

\begin{table}[h]
\centering
\begin{tabular}{|c|c|c|c|c|}
\hline
 & Operating system & Update & Cost & Access & User experience \\
\hline
APP & Different OS require different apps, which means that you need to build an APP for iPhone, BlackBerry, Android etc. & APP Store and Android Market have different procedures when it comes to updating the content. & Cost of developing APPs is higher because it is far more specialised. & APPs can only be accessed through APP Store or Android Market. & APPs provide better options for consumers. \\
\hline
MOW & MOWs are accessed through a browser and don’t need to fit different operating systems. & MOWs can be done instantly through the backend. & It is easier to adopt an existing website into a MOW. & MOWs can be accessed through all different kind of internet browsers. & User experience is less than with an APP but technology changes are on the way to enhance this (e.g. HTML5). \\
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Targeting primary care practitioners

Activity 1: Using Social Media in an Offline Event

When using social media for a scientific seminar, conference or press conference, it is important to note that it is much longer process than the actual time, since it includes the period from attendee’s arrival until when they leave. This may be longer than the events ‘speaking’ time.

\textsuperscript{32} Here is a list of tips and suggestions for mobile sites builders: \url{http://designshack.co.uk/articles/css/quick-tips-for-creating-a-mobile-optimized-site/}
The process described below consists of three major touch points and includes activities to be done before, during and after the event. The ideas only focus on digital and social-based ideas, and do not cover classic event marketing and PR initiatives.

**Before the event**

**Create awareness**: Use as many different platforms as possible, and get partners, speakers and sponsors to help you spread the news of your event.

**Publish attendance lists**: Create a website where materials can be shared online so participants can come prepared. Such a website can be a sub-site linked to your campaign or institutional website. LinkedIn is a good platform to publish such lists since most professionals have already had a profile. In order to publish your event on LinkedIn, your institution must have either 'Company Pages' or create a group. The process is in principle similar to creating a Facebook page, insofar as it requires information about your institution, your aims and allows listing the campaign messages. For more information on how to do this, LinkedIn has a useful Learning Centre.

**Online calendars** also provide good opportunities to promote the event on a third-party platform. Eventful is one such platform, where you can publish your event. Eventful has around 17 million registered users. For the first time you use the site you need to sign up which can easily be done through your Facebook account. You are then taken to the 'adding event' form and here you add all important information about the event. Remember to add as much information as possible including names of speakers with patient communication, interesting topics related to patient

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33 Either the IT department or the developers of the website can be contacted in order to offer assistance on sub sites/campaign sites.
35 [http://learn.linkedin.com/group-management/](http://learn.linkedin.com/group-management/)
36 [www.eventful.com](http://www.eventful.com)
communication and antibiotics. You can edit the event at any time via your profile. Online calendars such as Eventful, local online media often host and maintain event sites. These can also be helpful when it comes to creating awareness.

If Twitter is used among your target audience, create a hashtag\(^\text{37}\) (\#) for the event. By doing so, people can search for the tag and monitor everything being said about event by participants, speakers, organisers etc. It also allows participants to connect with each other and interested stakeholders to find out more about the event. In order to create a hashtag, you:

Choose a hashtag that can easily correlate to your event.

Ensure your hashtag has not been used before. The top 3 most used hashtags within the field of healthcare are:

\#HITsm : Healthcare IT social media

\#mhsm : Mental Health and Social Media

\#hcsmca : Healthcare social media Canada

A full list of healthcare related hashtags is available [here](https://support.twitter.com/articles/49309-what-are-hashtags-symbols).

Follow the hashtag and monitor what people are saying. This can easily be done through Twitter. At the right side is an example of a search on \#mobilehealth. Please not that it automatically updates when a new tweet appears:

37 https://support.twitter.com/articles/49309-what-are-hashtags-symbols
Create tags where information is being displayed including the official # (see above on how to create hashtags). Ensure the information is related to patient communication or the prescription of antibiotics.

Allocate a person to monitor Twitter, film and take photos.

Invite bloggers/journalists to blog live and let them post the most valuable take-aways straight away. This can either be done on the bloggers’ own sites or as an integrated live feed on your website.

Identifying bloggers who write about patient communication, antibiotics or healthcare can take some time, but it is important to find the right ones38.

Inviting bloggers is similar to dealing with journalists at a regular press event. They want interviews, exclusives and interesting materials. Therefore it is important to have press materials ready for such activities.

It is also possible to have video streaming on mobile phones and your Facebook page. Bambuser is such a service that can be integrated with Facebook and other social media platforms. All it requires is a video camera with an internet connection (like a webcam or a mobile phone).

Keep the momentum by creating a LinkedIn group, either about the event or the topic for the event. This allows materials, presentations, photos, films, #conversation to be shared after the event.

Integrate uservoice on your website to ensure continuous development and to collect valuable ideas and comments.

38 Here are some blogs that could have relevance for Patient Communication: [http://mdwhistleblower.blogspot.com/](http://mdwhistleblower.blogspot.com/), [http://www.rncentral.com/nursing-library/careplans/100_best_health_care_policy_blogs](http://www.rncentral.com/nursing-library/careplans/100_best_health_care_policy_blogs)
Ask presenters to share their presentations on Slideshare and inform participants that these will be available after the event.

Activity 2: Entering the Twitter Universe

Twitter\(^\text{39}\), as a popular social media site, is a good platform to communicate with primary care prescribers about antibiotic resistance. When communicating with primary care practitioners, it is important to find them where they are and look at their consumption of digital content. Primary care practitioners are likely to spend some of their workdays behind their desk and studies have shown that they are more likely to seek information online. Moreover, many practitioners use their own electronic devices such as smartphones and tablets\(^\text{40}\) to do so. The latter are useful tools when working with social media\(^\text{41}\). Twitter could therefore be a good platform to communicate with primary care prescribers about antibiotic resistance.

In both research and surveys of EAAD partners, Twitter was a commonly used platform. Twitter can enhance awareness about institutional news, materials, campaigns and services. Furthermore, it can be used to build and deepen relationships with existing and potential members, stakeholders and opinion-formers, including journalists. Due to the way Twitter works, it can also be used to improve general reputation, including managing issues and crises\(^\text{42}\).

We recommend the following 4-step approach to starting, managing and optimizing your official presence on Twitter:

Some key things to consider when initially setting up your official presence on Twitter:

\(^{39}\) http://twitter.com/ 
\(^{41}\) http://www.cnw.ca/en/releases/archive/May2011/17/c5409.html 
\(^{42}\) The European Commission’s Directorate-General for Health and Consumers has prepared a document dealing with crisis, it is called: "The Importance of Social Media during a Crisis" and is published in September 2010
Ownership: Decide who is going to edit, manage and promote the channel. This should be someone with a deep knowledge of antibiotics, and of course, the campaign. It is not recommended to create a Twitter profile which is only active during EAAD, but rather have a profile where information, resources and news can be shared continuously.

A number of free tools exist with workflow functionality that enables teams to work together in different offices in order to manage a Twitter-stream. These include Hootsuite and Co-Tweet.

User ID (aka ‘handle’): Your official company Twitter ID is part of your brand and should be consistent with how you describe your company especially because Twitter accounts and conversations are indexed by search engines such as Google and Bing. There is a fifteen character limit for usernames. However, try to use your company and/or name fully where possible.

User Profile: Make sure to fill out your Twitter profile as completely as possible, including your physical location and the company’s homepage URL. This adds legitimacy to your account and makes it easier for people to find you. Only one email address per account is allowed.

Try to include keywords associated with your field of work, especially if it is not obvious from the name of the division. This could be: Antibiotic resistance, appropriate antibiotic use, antibiotic prescribing, professional medical advice, communication with patients.

Picture: Your Twitter profile image instantly helps identify you. Use your company logo or photo as your profile picture for your account. This will appear on your profile and next to your tweets.

Background image: To help brand your Twitter account, it is a good idea to use a background graphic that helps bring the institution to life or is instantly associated with the institution.

Privacy setting: Twitter allows users to protect their profile to keep their updates private. However, it is not recommended that this feature is enabled. While you may be concerned about competitors reading your pitches, using the privacy feature runs counter to the spirit of the tool: a medium for listening, learning and sharing.

If you find you are being followed by a user who is obviously fake or overtly spamming you with sales pitches, you can always block an individual account. To block a user, go to http://twitter.com/yourusername/followers and click on Block [username] under Actions.

Learn etiquette: The same rules of general phone and email communication also apply to Twitter. You only want to pass along information to a reporter who is genuine to his or her beat. Wasting a reporter’s time is never a good idea.
When appropriate, engage with individuals in the public timeline around a given topic. But remember the distinction between a public @message and a direct message - not everyone needs to follow your one-on-one dialogue.

Whilst it is fine to follow journalists (see 'Follow'), only send direct messages to journalists when you have an established relationship.

**Understand language:** Make sure you understand Twitter’s unique language before actively diving in. The most important are:

**DM:** Direct Message  
@: Use to reply and always include proceeding to a Twitter ID in a reply.  
RT: Re-tweet (same as forwarding a message).  
Tweet: Sending a message on Twitter.  
#: Using the hashtag gives you possibilities for indexing your tweets and makes them searchable⁴³.

Having created and customised your Twitter profile, focus initially on identifying people who are likely to be interested in what you have to say, or who themselves have something interesting or valuable to say:

**Identify** journalists, media publications, healthcare bloggers, partners, suppliers, competitors, etc. Good examples of these within the field of healthcare and in particular antibiotics can be found in the Appendix 1.

**Tweeters:** Look to find people tweeting about topics relevant to you, in this case about prudent use and prescriptions of antibiotics. There are a number of ways of doing this. We recommend you start using the Twitter Advanced Search tool, which enables you to search for relevant conversations (using keywords/phrases), people (enter their full name, surname or handle) and other options. Make sure you understand Twitter’s search operators when using this tool.

**Opinion-formers:** Generally speaking, the larger the number of followers, the more influence an individual/institution has.

There are also a number of tools that calculate influence-based on a number of criteria. A good example is Klout, which produces a score-based on the likely reach of your message, its amplification and the relative influence of your network.

Geography: Some tools provide lists of top Tweeters by geography, such as Twitterholic.

**Categorise** your followers so they are easier to track. Useful tools include:

**Twitter Lists** allow you to categorise those you follow into up to 20 categories or lists. This could include: Healthcare journalists, primary care bloggers, primary care organisations, private operators, doctors, bloggers, experts etc. These lists can be either public or private. Making a list public means those on the list are listed as such on their own profile, thereby increasing the visibility of your list and of yourself.

Once the basic infrastructure is in place and content is starting to flow, then look to engage people.

**Content:** Twitter is another increasingly important channel to reach your target audiences. However, you only have 140 characters to work with, potentially including the URL of the content.

Here are some examples on how to use the campaign messages on this platform:

- Get the news insights about the growth of antibiotic resistance [link] #EAAD #antibiotics #HC
- Communication with patients is key – here is some inspiration [Link] #antibioticprescription
- My presentation from the Doctors 2.0 conference in Paris. [Link] #slides #Doctor2.0#EAAD

Where possible, include a shortened link to relevant information. It can be a press release, news article, feature article, podcast, blog post etc. It is important to use shortened links to preserve sufficient characters for your message.

There are many tools that create shortened links. We recommend Bit.ly. Twitter itself also provides its own link-shortening service.

**Credibility:** Build credibility with journalists and opinion-formers by linking to relevant articles of interest, especially those that you think your audience may not have seen before. The more you are seen as a provider of a valuable service and one that does not focus overly on your corporate or product news, the better.

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44 Hootsuite: Integrates your Lists on its dashboard.
45 Here is an example of a twitter list: [http://twitter.com/#!/Alex__Butler/healthcare-sm-big-dogs](http://twitter.com/#!/Alex__Butler/healthcare-sm-big-dogs)
Tone of Voice: While you are using Twitter as a business tool, it is important to be conversational and not overly formal. Indeed, it is advisable to be less formal than in other forms of marketing and communication.

Try to cultivate a genuine, real voice. Overt self-promoters are usually ignored.

However, remember that you should not be posting anything that will embarrass the company or that you would not want your boss to see.

Re-Tweet: It is considered good etiquette to re-tweet others’ tweets that you find in some way interesting, unusual or valuable. This is a good way of building a relationship with your audience. Re-tweeting is about endorsing someone or paying them a compliment, so it is important to thank any person who re-tweets you. Followers will also re-tweet your message as well. As a consequence, your message reaches a potentially much larger audience, giving you extra exposure.

Conversations: Mentioning someone in your tweet or responding to a specific post (or set of posts), is a good way of engaging others in conversation. These could be your followers, or anyone else for that matter. It is also a nice way of showing that you are listening, and being proactive.

Dos and Don’ts:

<table>
<thead>
<tr>
<th>Do</th>
<th>Don’t</th>
</tr>
</thead>
<tbody>
<tr>
<td>Add value to your users and conversations</td>
<td>Be boring!</td>
</tr>
<tr>
<td>Re-tweet stuff you find relevant, interesting or valuable</td>
<td>Link to your own site all the time (‘Linkspam’)</td>
</tr>
<tr>
<td>Engage in conversation on both your own and other Twitter-streams</td>
<td>Treat Twitter simply as a one-way distribution channel</td>
</tr>
<tr>
<td>Pose questions on your own stream</td>
<td>Be overtly self-promotional</td>
</tr>
<tr>
<td>Ask for feedback</td>
<td>Focus on quantity over quality</td>
</tr>
<tr>
<td>Write as a person, not an institution</td>
<td>Get into fights</td>
</tr>
</tbody>
</table>

Management Tools: There are a number of tools that help you manage your Twitter account. Here are some recommendations:
Bit.ly: A web-based tool that enables you to create shortened URLs and post tweets direct to Twitter. Bit.ly also enables you to track the click-throughs on each link, what country these are from, as well as who is re-tweeting your tweets. In order to do this, add “+” after the link.\footnote{It looks like this: bitly.com/oXq55n+}

Tweetdeck: A tool available on the web and as an iPhone App that enables you to track conversations relating to specific keywords/phrases. With this tool you can see who is re-tweeting your tweets, mentioning you or sending you direct messages as well as manage workflow across different teams. You can also track other online channels, including your Facebook newsfeed and LinkedIn network updates.\footnote{Tweetdeck is mentioned in Appendix 3 ”Important initiatives when working with social media”}

You can track and measure the success of your Twitter-stream in the following ways:

- **Twitrattr** helps identify the sentiment around specific keywords/phrases. While it is not regarded as very accurate, it is currently the only service of its kind and it can help measure how sentiment changes over time.
- **Google Analytics** (or equivalent) tells you the volume of referrals from Twitter to your website.

When measuring, there are some key metrics to pay attention to:

**Followers:** The number of followers of your Twitter-stream.

**Exposure:** The reach of your post(s). Twitter does not currently reveal page views, so reach/exposure can only be calculated by adding the total number of followers of your Twitter-stream with the followers of anyone who mention or re-tweet your tweets.

**Website referrals:** The number of page views referred by Twitter to your website.

**Re-tweets:** The number of times your post(s) are re-tweeted.

**Mentions:** The number of times your Twitter-stream is mentioned (using the “@” sign) in other people’s tweets.

**Click-throughs:** The number of times a tweet link is clicked on.
Feedback quality: The usefulness or constructiveness of audience feedback/direct messages provided via Twitter.

Feedback quantity: The quantity of feedback/direct messages from audiences on Twitter.

Website/promo registrations: The number of people who signed up for a discount or promotion via Twitter.

Some additional considerations when using this platform

The potential to target, reach and engage with large numbers of people, both on the Twitter platform as well as via the broader internet (via Twitter, ‘Like’ buttons, search engines and applications) is huge. But there are also some challenges:

Building community: Getting relevant healthcare professionals to follow you can initially appear slow and tricky - it can take time to build a good body of users.

Control: Like all ‘social’ media, institutions cannot control discussions on Twitter, nor can they control their impact. Users can ask you what they want, when they want and how they want.

Skills: Many institutions do not have the in-house skills to manage Twitter-streams, though these can be learnt relatively easily.

Resources: While Twitter is much less resource-intensive than Facebook, it does need to be borne in mind that it still requires an individual (or team) to manage and promote it.

Costs: While Twitter-streams require less input from a content point of view, it can still take time, effort and resources to make your Twitter-stream a success.
Targeting hospital practitioners

Activity 1: Building a LinkedIn group

LinkedIn has more than 120 million users in 200+ countries, of which 26 million members are from Europe\(^{48}\). In 2010, LinkedIn upgraded the functionalities for LinkedIn Groups, and now offer many possibilities to build relationships with opinion-formers and to increase awareness about key messages.

LinkedIn Groups enable users to establish new business relationships by joining alumni, industry, professional and or other relevant groups. LinkedIn groups can be created in any subject and by any LinkedIn member. Some Groups are specialised, dealing with a narrow domain or industry; others are very broad. Professionals exchange materials, news and information so that knowledge can quickly be spread.\(^{49}\) There are three steps:

**Identify Groups:** Before you start creating a Group on LinkedIn, scan the Group Directory to see if there are existing similar Groups\(^{50}\). The Group Directory is easily accessed via LinkedIn. If similar groups exist, how many members do they have? If your topic does have active groups, look for a gap. Can you narrow the topic down? Combine it with another topic? A little mind mapping may help you to find a unique twist on your topic.

Below are some search results of groups relevant to healthcare.

\(^{48}\) [http://press.linkedin.com/about](http://press.linkedin.com/about)
\(^{49}\) [http://www.pbs.org/engage/blog/doctors-use-social-media-collaborate-online](http://www.pbs.org/engage/blog/doctors-use-social-media-collaborate-online)
\(^{50}\) LinkedIn Group Directory is accessed here: [http://www.linkedin.com/groupsDirectory?trk=hb_side_grpsdir](http://www.linkedin.com/groupsDirectory?trk=hb_side_grpsdir)
<table>
<thead>
<tr>
<th>Name</th>
<th>Topic/focus</th>
<th>No. members</th>
</tr>
</thead>
<tbody>
<tr>
<td>World Antibiotics Society</td>
<td>This group is dedicated to discussing new antibiotics pharmacology, therapeutics, resistance, regimens, microbiology and sensitivity pattern, and any problems associated with antibiotics.</td>
<td>303</td>
</tr>
<tr>
<td>American Association of Pharmaceutical Scientists, AAPS</td>
<td>AAPS LI group is a community of scientists employed in industry, academia, government, and other research institutes worldwide. The aim the LI group is exchange of knowledge to enhance contributions to public health.</td>
<td>8.113</td>
</tr>
<tr>
<td>Environmental Health &amp; Safety Professionals</td>
<td>A touch base for Safety Professionals to network, collaborate and to reach out.</td>
<td>21,558</td>
</tr>
<tr>
<td>Alliance for the Prudent Use of Antibiotics</td>
<td>APUA’s goal is to improve antimicrobial policy and clinical practice worldwide so as to preserve the power of these lifesaving agents.</td>
<td>38</td>
</tr>
<tr>
<td>Public Health Professionals</td>
<td>Association of Networked Public Health Professionals is open to Doctors, Nurses, Social Workers, Nutritionists, MPH, and other specialists to share experiences, discuss trends in public health and share news</td>
<td>2,684</td>
</tr>
<tr>
<td>Occupational Health Nurses, Advisors &amp; Managers in the UK</td>
<td>A Specialist Occupational Health Group where likeminded Occupational Health Professionals can talk about current Occupational Health trends and networking within the UK</td>
<td>377</td>
</tr>
<tr>
<td>Patient Page</td>
<td>Understanding and discussing patients' perspectives</td>
<td>610</td>
</tr>
<tr>
<td>Field Epidemiologists in Europe</td>
<td>Each country has a group of professionals that work with epidemiology in public health practice. Their main task is to provide evidence for decision making at the population level. Some countries have professional societies for epidemiologists, and there is an International Epidemiology Association (IEA). This group is a start to assess the interest in creating a forum to link those field epidemiologists between countries.</td>
<td>347</td>
</tr>
<tr>
<td>e-Patients &amp; Health 2.0 European Alliance Network</td>
<td>This group is dedicated to actors (patients, vendors, physicians, pharmacists, nurses, academics) interested by e-Patient &amp; Health 2.0 in Europe.</td>
<td>163</td>
</tr>
</tbody>
</table>
Creating a Group: When writing the Group description, make sure to include keywords/phrases that will help people find your Group. List the Group on the Group Directory.

Ownership: You may also want to assign a “Group Manager” role to colleagues so they can help maintain the Group. Group managers have the same administrative access as the Group owner including managing membership and discussion. The only actions the manager cannot do are transfer ownership and close the Group.

You can also name some “Group moderators” who have the ability to police and delete content, manage RSS feeds and initiate discussions. Moderators cannot control invitations and requests to join the Group, or make changes to settings.

Content: Content on the Group must reflect the Group brand identity/name and focus.

Post some content to the Group before promoting it, as it gives people a taste of what to expect if they join the Group.

Content could be tips, links to articles, videos or presentations related to your topic, details of upcoming product launches and other events.

The toolkit for the key messages contains a huge amount of references and valuable information. We highly recommend you use this for groups dealing with the future challenges of antibiotic-resistance.

Suggestions for content based on key messages on this platform:

Antibiotic-resistant bacteria have become an everyday occurrence across Europe [Link] Do you know of any other resources that deal with this problem? Help us collect the latest research.

Showing the facts – numbers and research are the best way to show how the use of antibiotics contributes to the problem. We have collected some data for you [Link]

Why care? Give us your reasons why we should promote prudent use of antibiotics.

Promotion: Once you have posted some content to the Group, you can start promoting it. Encourage your communications teams, employees and partners to join the Group.

Add the details of the LinkedIn Group to your email signatures. Promote via your website, Facebook profile and Tweet about it.

Maintaining Your Group: As Group owner, you can send emails to members. These emails have a high deliverability rate because most email servers recognise LinkedIn’s email address, which lowers the chance of ending up in a spam folder.

Add an RSS feed from your Twitter-stream. This will automatically update your LinkedIn Group and reduce ongoing maintenance time. Initiate discussions on relevant topics e.g. lighting design, lighting technology research etc. Contribute to conversations started by Group members. Recognise ‘Top Influencers’ in the created community – social credit can help spur greater participation by key individuals, and by the Group as a whole. Add details of events, materials, photos, videos and other events on the LinkedIn events calendar, and encourage participants to RSVP on LinkedIn. Take care to balance how many email messages you send to Group members, as it can be seen as spam.

Groups can have sub-Groups focused on specific topics (or geographies). For example, the Architect Group has a small practice sub-Group.

Group Members: The number of members of your community.

Quantity of Discussions: The number of discussions in your community.

Quality of Discussions: The quality of discussions in your community.

Feedback quality: The usefulness or constructiveness of audience feedback/direct messages provided via LinkedIn.

Feedback quantity: The quantity of feedback/direct messages provided by audiences on LinkedIn.

Website referrals: The number of page views referred by LinkedIn to your website.

Website/promo registrations: the number of people who have signed up for a discount or promotion via Twitter.
Some additional considerations when using this platform

**Building community:** Getting people to follow you can initially appear slow and tricky; it can take time to build a good body of users.

**Entering conversations** on third party LinkedIn Groups or Answers needs to be done in such a way that it is not seen as spam or irrelevant. It must add value to the conversation.

**Control:** As with all ‘social’ media, organisations cannot control discussions on LinkedIn or the impact that these discussions have. Users can ask you what they want, when they want and how they want.

**Skills:** Many organisations do not have the in-house skills to manage or participate in communities on LinkedIn, though these can be learnt relatively easily.

**Resources:** Like other social media platforms, LinkedIn does require an individual (or team) to manage your community.

**Costs:** Building a presence on LinkedIn takes time, effort and resources.

**Activity 2: Developing a Social Media News Centre**

A well-integrated and frequently updated sub site dedicated to news on your national campaign or institutional website is a great platform to present your wealth of information and resources. An upgrade of your news centre could include some of the following assets:

- Showcase the qualities and expertise of your campaign or institution
- Increase accessibility to the public, professional groups, advocacy groups, stakeholders, media, and other opinion leaders
- Increase and diversify the news centre communication related to include services, initiatives, news, and relevant knowledge in the field
- Give a new digital life to ‘dead’ and forgotten documents

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**Welcome to BASF's Social Media Newsroom**

The BASF Social Media Newsroom combines all of the global social media activities published by BASF and by third parties about BASF. It offers the latest news, content and information about the company in one place. You can share the Social Media Newsroom with others by using our “Share This” function at the end of the article. If you are interested in other social media channels we offer, you can find a list of our activities here.
This project focuses on making the first moves towards a more dynamic, interactive and sharable social media news centre. Such a news centre can consist of: videos, updates on trending issues, RSS Feeds, aggregation of keywords mentioned in the regular media monitoring, tag-clouds and live streaming from other media platforms e.g. blogs or Facebook Pages. In this document, a number of social platforms have been mentioned and these can also be used in the news centre as well. It is recommended that a social media news centre is established as an ongoing project and not only activated while the EAAD is taking place, therefore you should consider if to link it as a sub site of your institution’s website or of your campaign website.

The following three steps have been created in order to engage and drive an audience which consists mostly of Hospital Practitioners. However, it is not possible to exclude other interested parties. It is important that a socially-oriented news centre is not only meant to publish content - it is also meant to function as an outlet aggregating comments, feedback and insights – in other words, a storytelling-platform. It is also important to note that content will likely extend across other external platforms such as Facebook, Twitter and LinkedIn.

This project is advised for more advanced users as it requires some additional insights and experience of platform building and working with technical requirements.

Here are three steps that will take you towards a more social and dynamic news centre:

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Developing the news centre: The focus here is on creating a sub site dedicated to news. The first step in developing a news centre is discussing what to showcase and make accessible. It is important to be aware that the main website and the news centre will be significantly different in appearance and have different navigation structures. This can sometimes confuse users and if they do not recognise the sender a great opportunity for credibility is wasted. In order to make sure that the design, wording and key messages are the same it is important to ensure an overall consistency. In other words a unified communication platform is crucial. Here is an example showing the many possibilities:

![Social Media Newsroom Template]

There are many things to include in a social media news centre. Here are some further suggestions:

Retrieval external data:
News filtering from other acknowledged news sources with relevant content can be displayed at the news centre; a good example is the New York Times’ Health section.

Social media filtering from relevant platforms can also provide useful content. Some of the previously mentioned resources include:

mentioned platforms can through widgets or social plug-ins (functions that let you see what your users have liked, commented on or shared on sites across the web) be integrated into the news centre\(^56\). On the right is an example of a live twitter stream that is fed into a website. This can be made with a list of interesting hospital practitioners or hospitals themselves\(^57\).

The news centre should further include functionalities such as tagging, rating and bookmarking in order to make sure that content gets a human touch and others can see what is the most popular, interesting and most read.

**Content:** Find the resources within the institution to ensure frequent updates and the selection of stories and materials to be published. When making use of functions mentioned above it is important to be selective on what to display and aggregate, and there has to be a good amount of time spent on identifying relevant resources, people and platforms.

It is also important to have a great pipeline of internal stories, former and future press releases, upcoming events and materials to ensure content is frequently updated. Also think of uploading existing and old materials so everything is reachable and the wealth of your campaign or institution is displayed.

To ensure it is frequently updated and relevant, use external partners and experts to provide content. In this case it is good to have a list of relevant providers such as ECDC, CDC and others that frequently communicate and publish materials about antibiotics and resistance\(^58\).

You can also make use of existing media monitoring. Today most institutions receive media monitoring from print and digital media. These resources can simply be reused and shared in social media news centre. Copyright restrictions however must be taken into consideration.

\(^56\) Both Facebook and Twitter provide widget-codes or social plug-ins that easily can be integrated, read more about Facebook's offerings in that matter [https://developers.facebook.com/docs/plugins/](https://developers.facebook.com/docs/plugins/)

\(^57\) [http://twitter.com/#!/tlists/hospitals-995](http://twitter.com/#!/tlists/hospitals-995)

Having made the effort and investment to create such a news centre, it is also crucial to promote the existence of it! There are many ways to organically create awareness. Include it in all press releases as a source to find further information. Secondly it can be included in newsletters, email signatures, brochures and posters, as well as in other offline materials targeted at this audience e.g. trainings, presentations, letters to hospital managers and factsheets.
Appendix

Appendix 1: Mapping of EU actors and influencers active on antibiotics (separate PDF)

Appendix 2: Survey of EAAD Partners and their use of social media (separate PDF)

Appendix 3: Important initiatives when working with social media