

**ITALIAN FAMILIES BEHAVIOR AND OPINIONS
ON THE H1N1 VIRUS**

METHODOLOGY

The sample base is represented by Italian families with at least one son/daughter.

		Cases	%
Nielsen area	1 North West	173	29%
	2 North Est	118	20%
	3 Center	119	20%
	4 South and Islands	184	31%
Total		594	100%

North West 173 interviewed	Piemonte, Val d'Aosta, Lombardia, Liguria
North Est 118 interviewed	Veneto, Trentino Alto Adige, Friuli Venezia Giulia, Emilia Romagna
Center 119 interviewed	Toscana, Marche, Umbria, Lazio
South and Islands 184 interviewed	Abruzzo, Molise, Calabria, Campania, Puglia, Basilicata, Sicilia, Sardegna



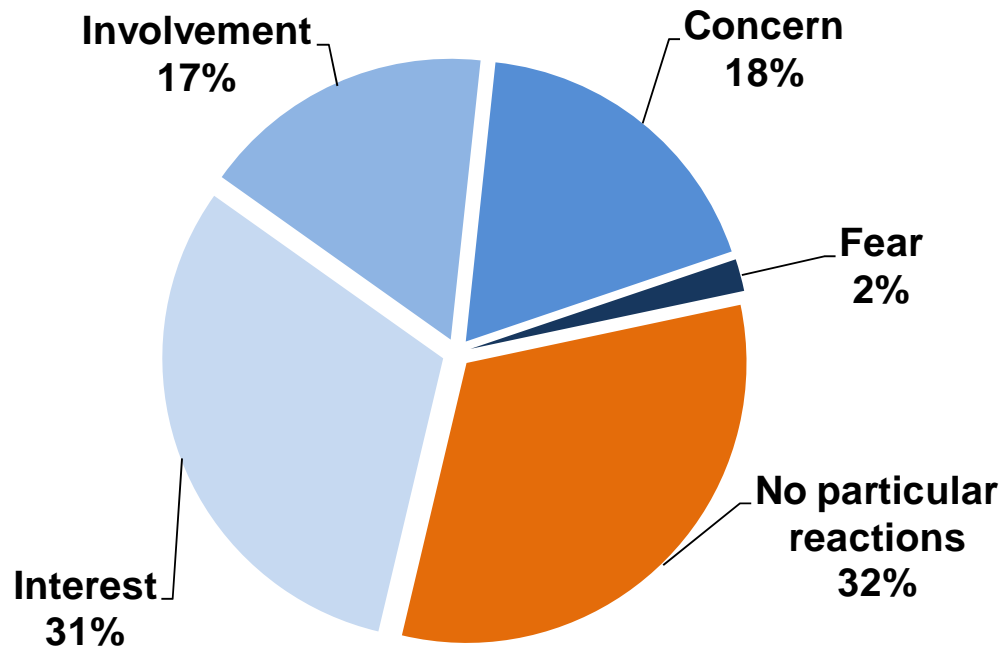
The survey has been published only after having obeyed the Communication Guarantor Authority Regulation concerning the diffusion of the survey results on mass media.

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Considering the following answers, how did you react to the news about the diffusion of the H1N1 virus, A type flu, also known as the “swine flu”?

Initial reactions to the news diffusion

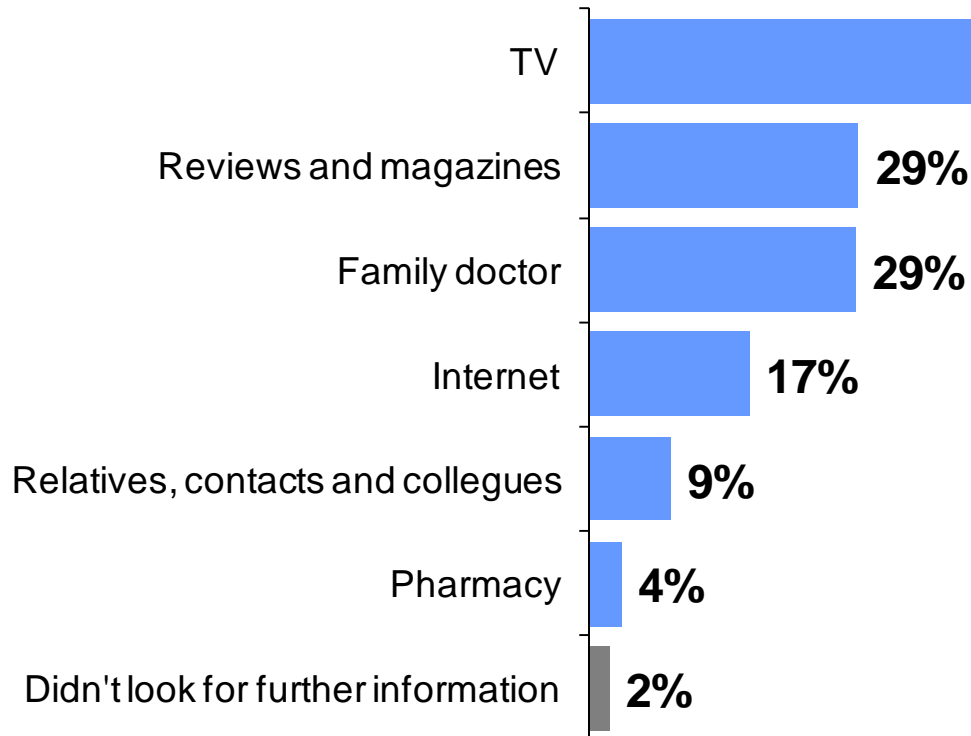


Base: 594 cases

Initially the research wanted to investigate the feeling about the diffusion and a possible pandemic. An emotional hierarchical scale has been listed in order to understand the involvement level. One-third of the interviewed, declared a substantial tranquility and a low emotional involvement level. 31% has been interested and has constantly followed the news. 17% felt involved and researched for more detailed information. About 20% showed concern and fear. They started to adopt precautions and to change lifestyle, and - in some cases - they avoided trips and events.

Which channels did you use to gather information about the diffusion of the virus?

Information channels

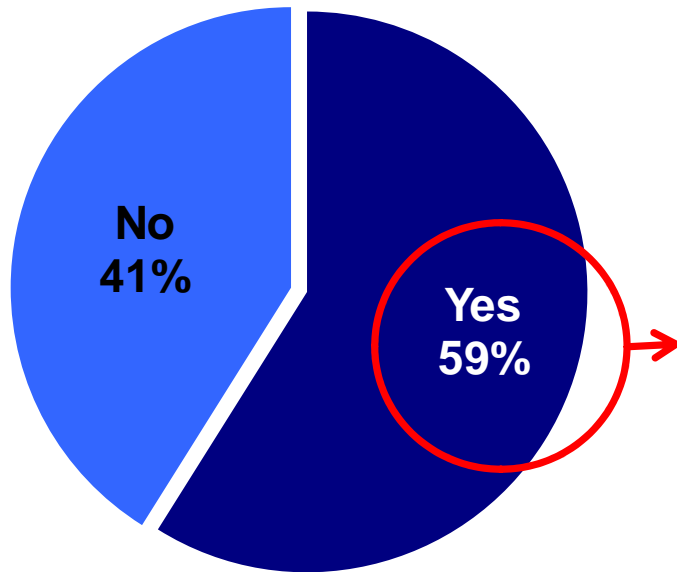


Base: 594 cases

Before evaluating the behavior or life style changes, the research has investigated the way Italian families gathered information. The reply could obviously be multiple. Except TV, which clearly reaches the greatest part of the population also in a passive mode, the role of the family doctor is very important which results as a real alternative media. 30% of the sample addressed to him, and the percentage reaches 51% for those who are more involved in gathering information. Internet has had an important role if we consider the diffusion of this media, especially for males (23%), for the interviewees with a degree (30%) and for people got sick at the beginning of the epidemic (24%).

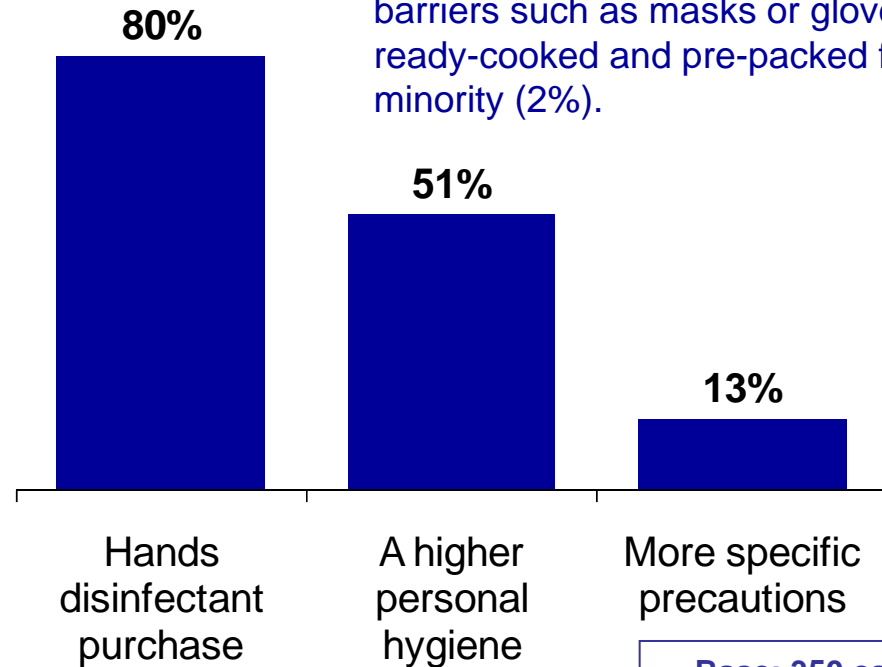
Did you implement preventive hygienic-sanitary behavior? If yes, which behavior in particular?

Preventive behaviors



Base: 594 cases

A strong impulse to purchase hands disinfectant, probably due to specific advertising campaigns and to capillary distribution strategies. More “specific precautions” are protective barriers such as masks or gloves and ready-cooked and pre-packed food for a minority (2%).

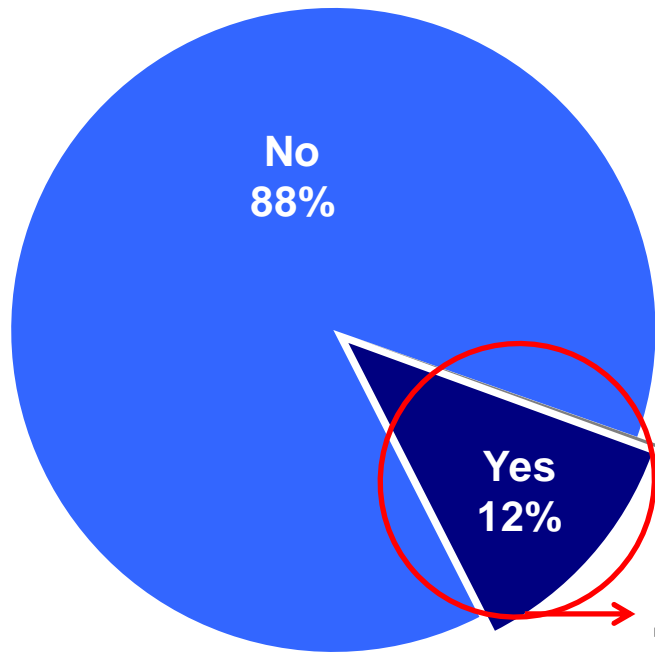


Base: 350 cases

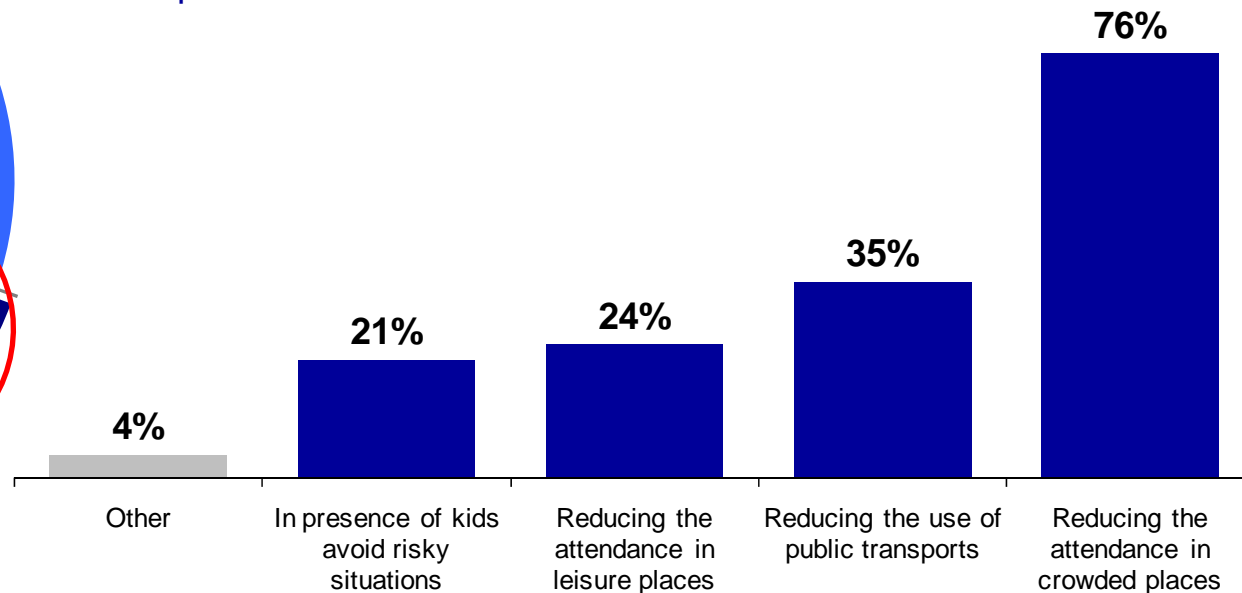
Except for hygienic precaution, did you change further your or your family behavior? If yes, which behavior in particular?

Change of habits

A higher attention to hygienic standards has been and still is the major concern in the families behaviour. Only a minority has changed its behaviors, especially reducing the attendance of indoor or crowded places.



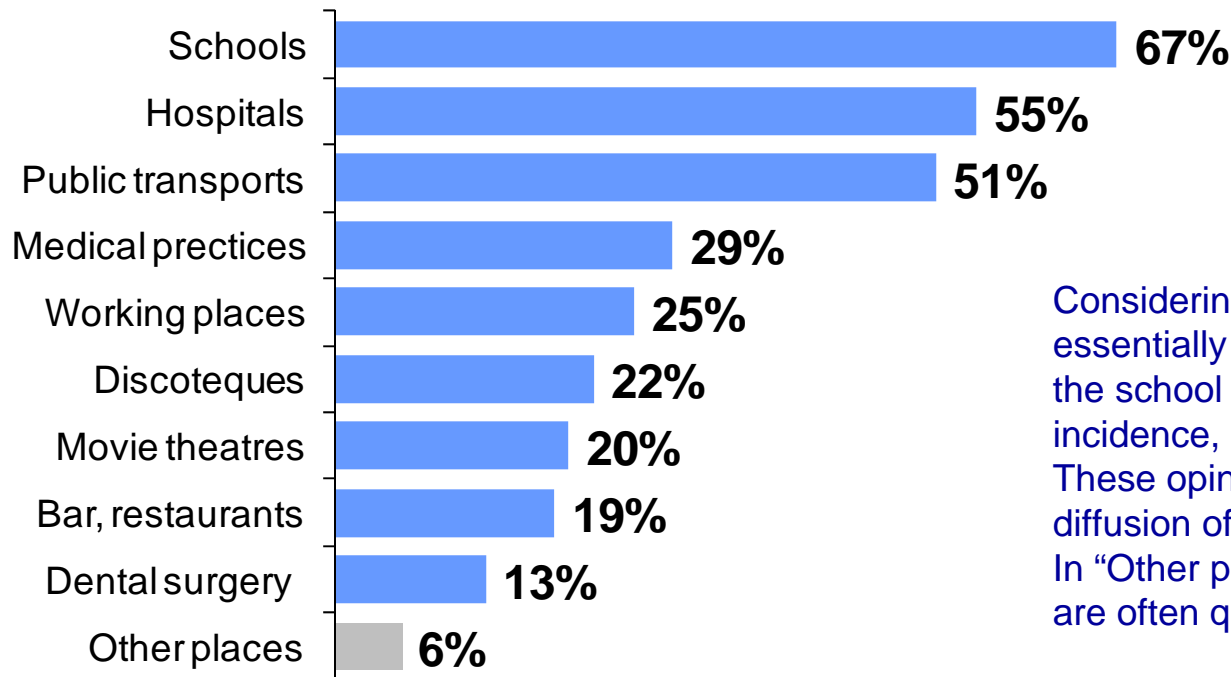
Base: 594 cases



Concerning infections, in your opinion, which are the most risky environments ?

Base: 577 cases

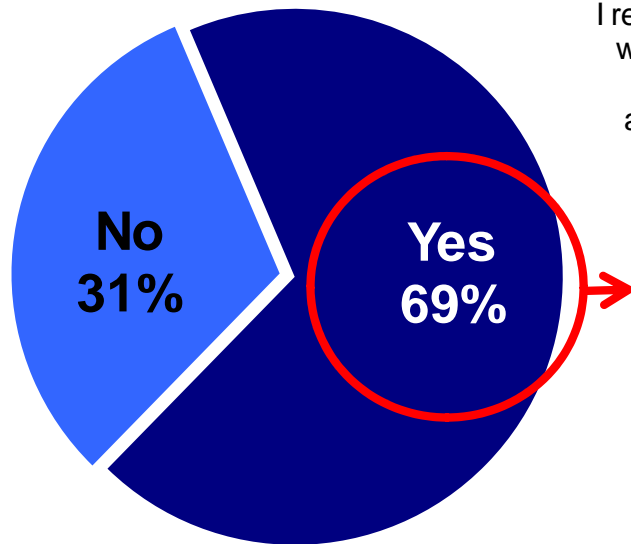
Risky places



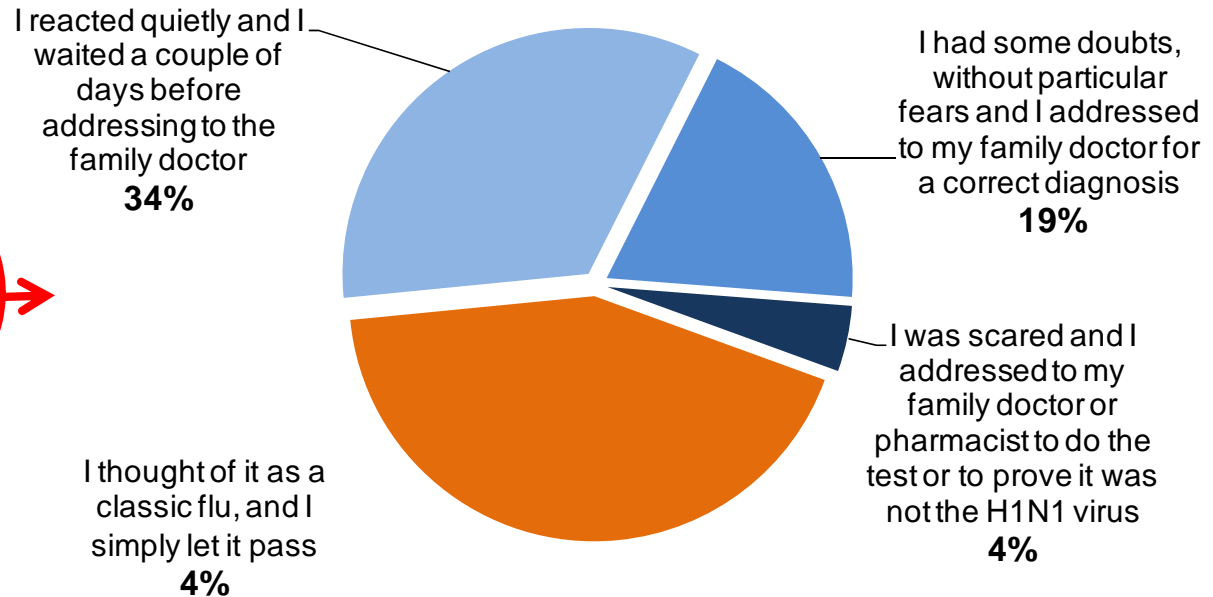
Considering the sample peculiarity, essentially composed by families with kids, the school is indicated with strong incidence, as the main place for infections. These opinions are enhanced by the actual diffusion of this virus within schools. In "Other places" supermarkets and malls are often quoted.

Did any generic flu episode occur in the last months in your family? If yes, which of the following behavior seems to be the closest to the one you adopted?

Generic flu symptoms cases



Reaction to generic flu symptoms

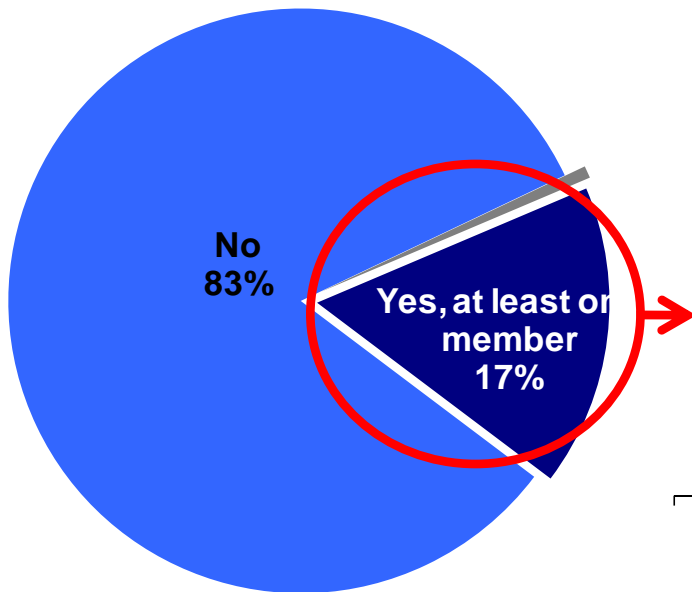


A “mature” reaction has faced the generic flu symptoms. 43% of the cases has simply let the disease pass, thinking of a classic flu or something not to worry about.

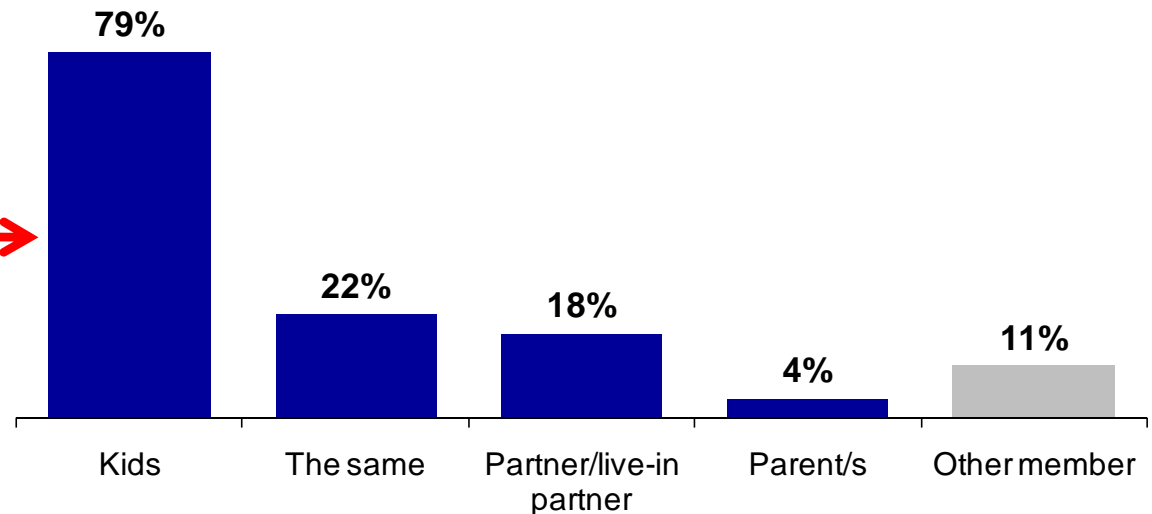
Included in 4% of scared people, few of them (1%) addressed to the first aid.

Has anybody in your family been infected by the H1N1 virus?

H1N1 infection



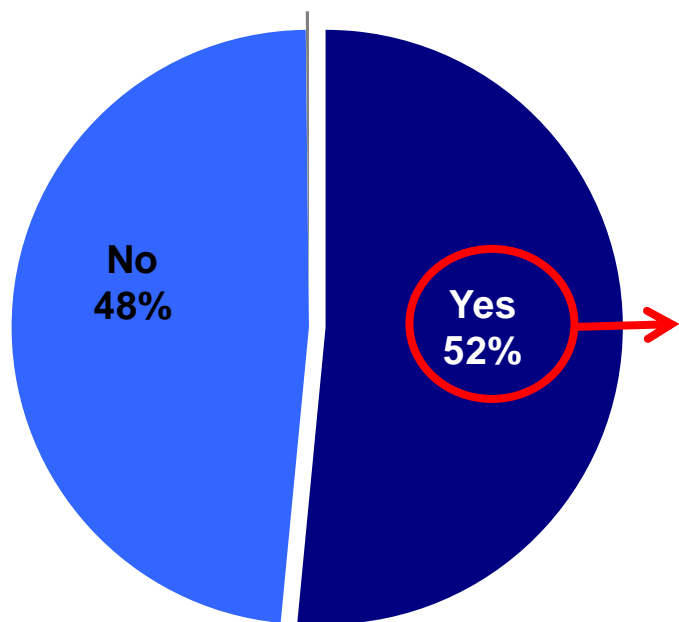
Family members who have been infected by the virus



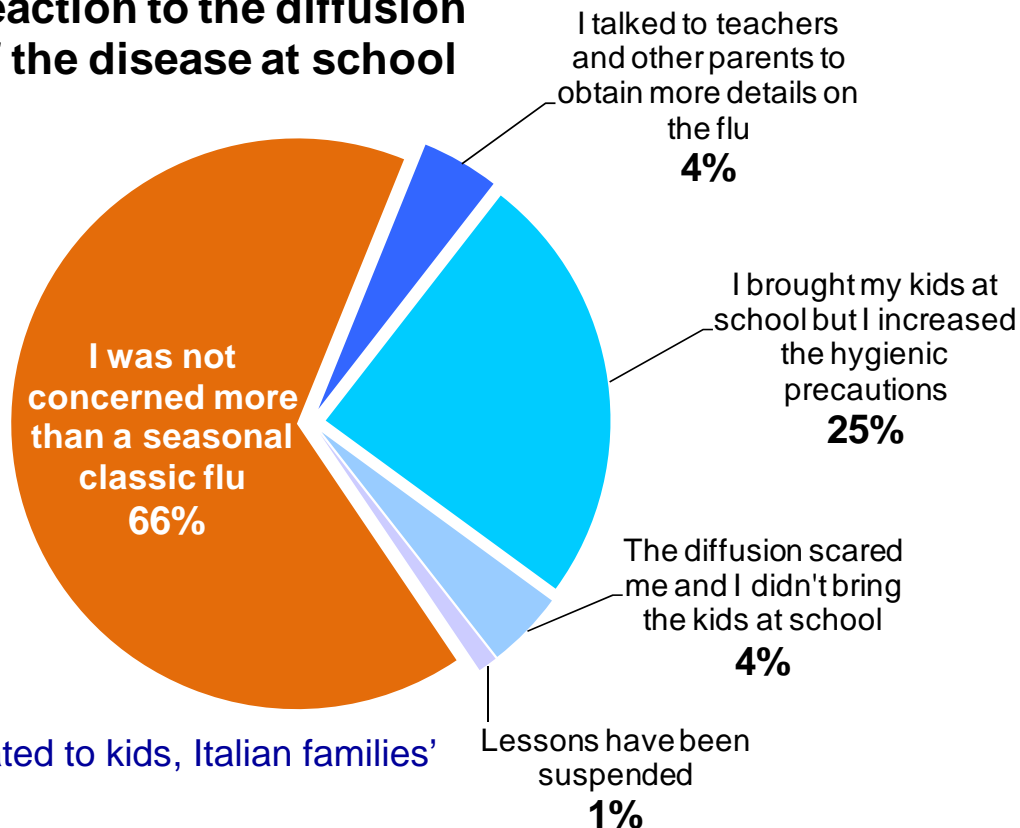
The research didn't want to measure the amount of people which have been infected – which data have been given by the body in charge of – but to supply an overall perspective of the phenomenon. In this case, we notice how, in 17% of the sample, there has been at least one case of H1N1 infection, in particular among kids. The sum of the percentages indicates an average of 1,3 members per family.

**Did any case of H1N1 in your kids' school occur?
If yes, how did you react to the diffusion of the disease?**

H1N1 cases in your kids school



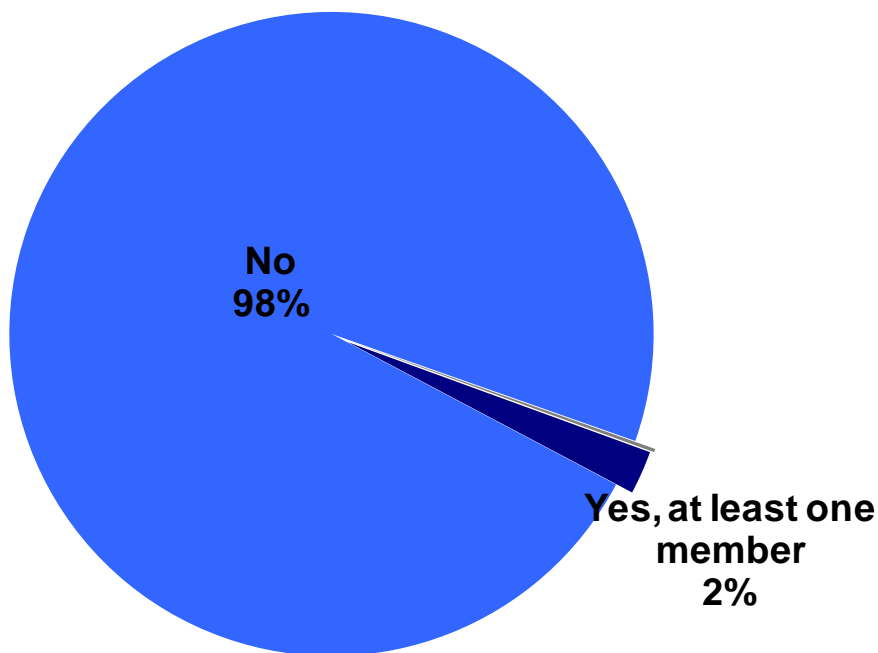
Reaction to the diffusion of the disease at school



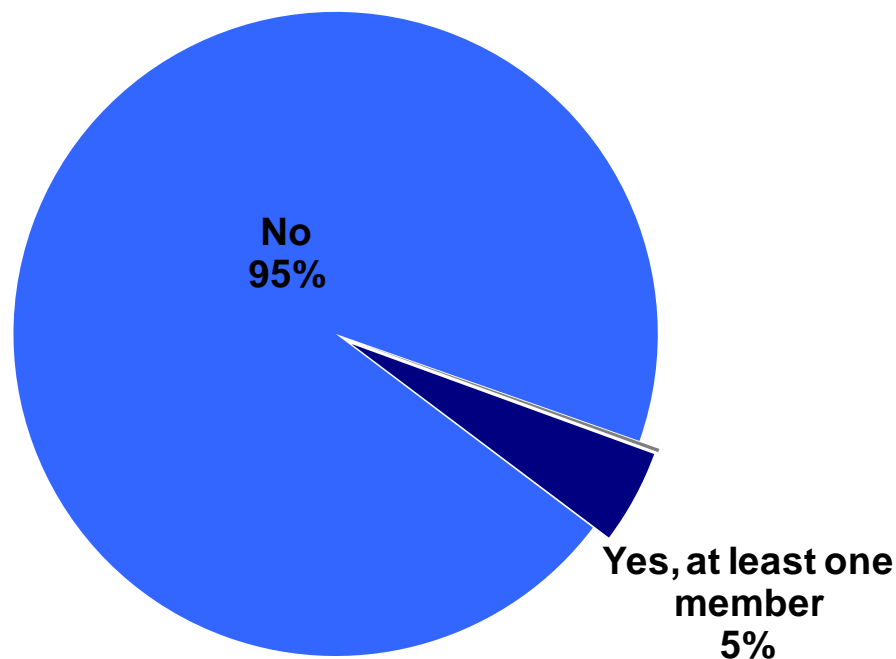
Despite the effective presence of a diffusion risk related to kids, Italian families' reaction was calm and without alarmism.

Has anybody in your family already undergone to the H1N1 test and/or the vaccine?

H1N1 Test



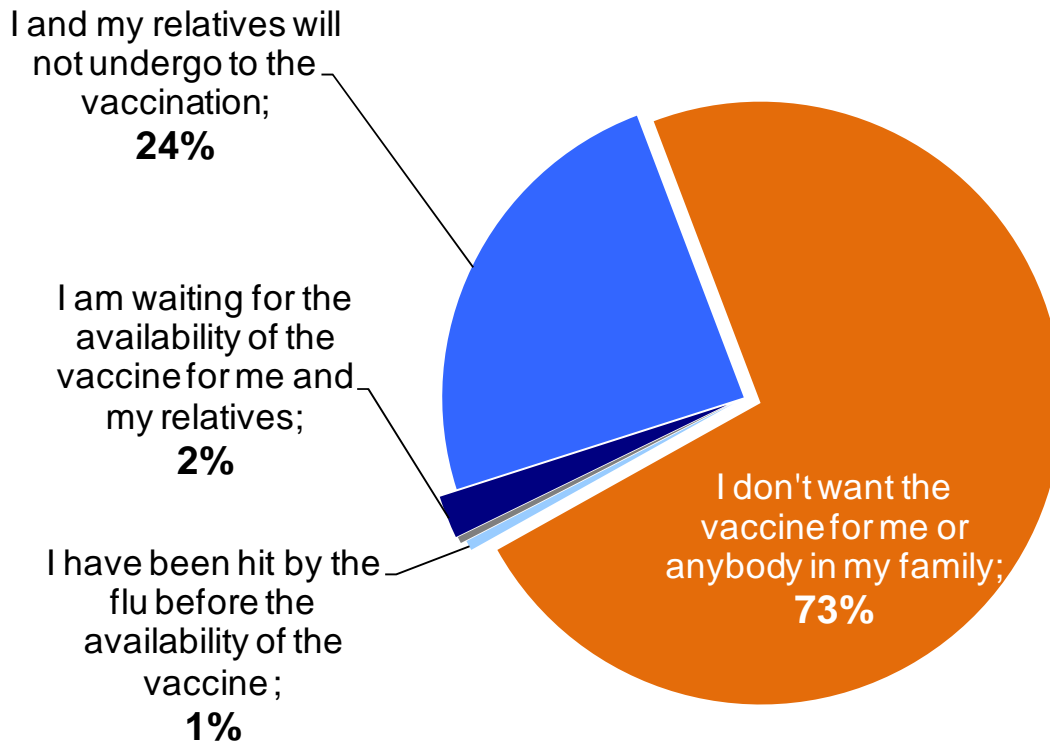
H1N1 vaccine



Also in this case the research didn't want to assess the amount of people undergone to the vaccine, but to evaluate the resistances which have moved even the "at risk" Italians away from the preventive vaccination.

If some member of your family underwent to the vaccination, which is your standpoint relatively to the H1N1 vaccine considering the following?

Orientation towards H1N1 vaccine

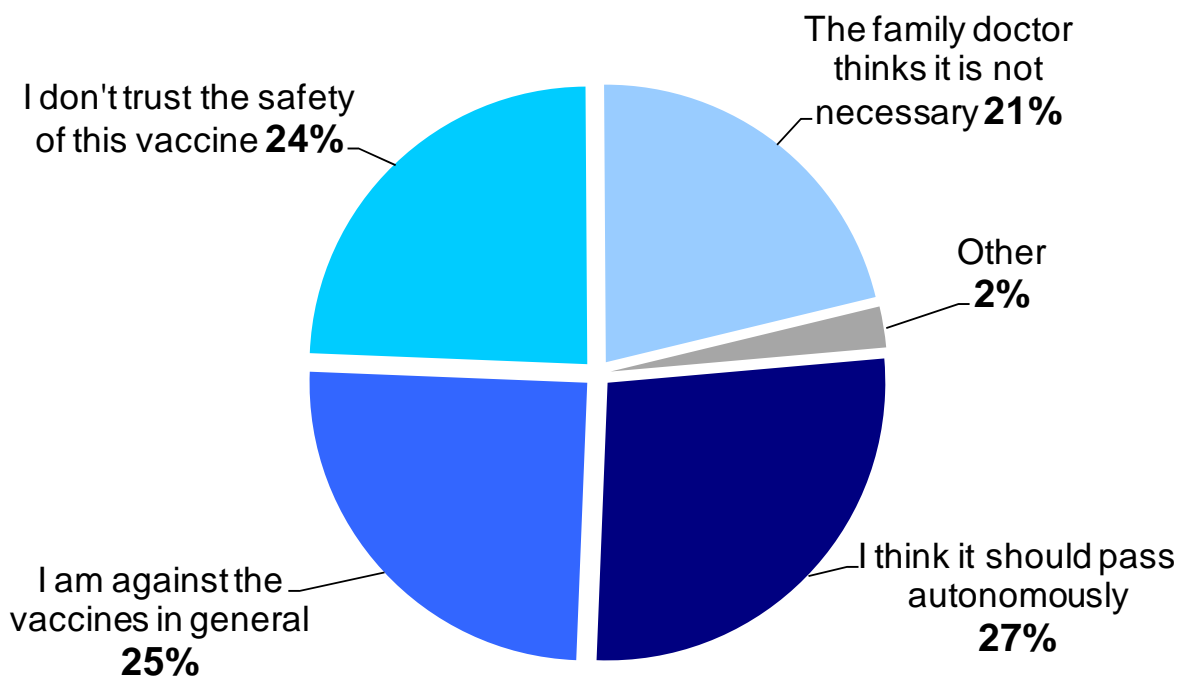


Base: 565 cases

The 95% of the families which have not been vaccinated yet, it is not intended to do it. Only 2% declares they are waiting for the vaccine availability. In particular, 3 interviewed out of 4 are clearly against the H1N1 vaccine; this clearly is a strong will also confirmed by the quoted motivations.

Since you don't provide you and your family with the vaccine, which are the main reasons of your choice?

Resistance to H1N1 vaccine



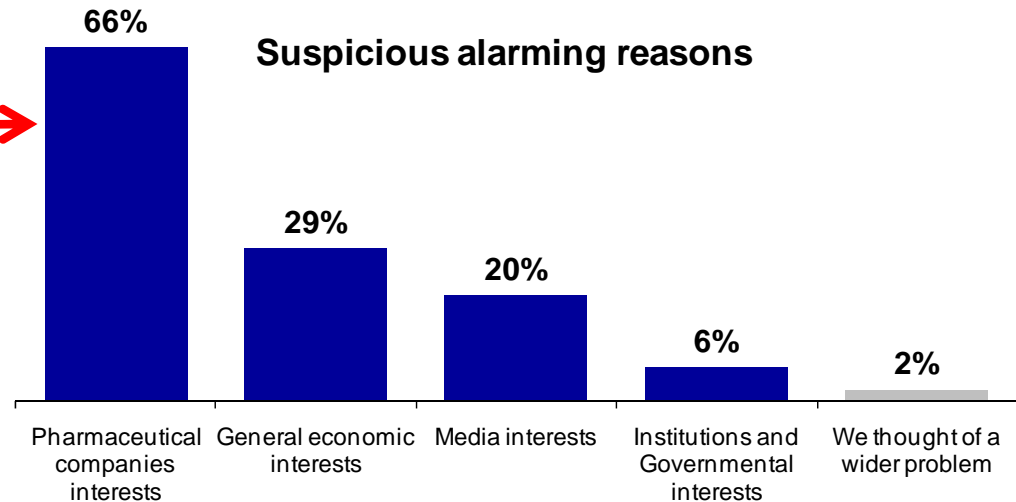
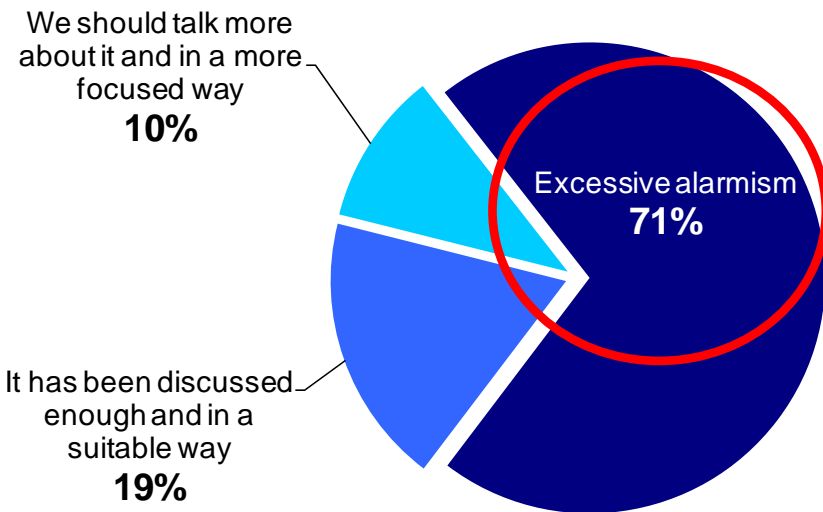
The main reasons of resistance to the vaccine have been asked to everybody not looking for vaccination neither for them or for their relatives. In this case only 25% of the respondents has a deep negative attitude towards the vaccines in general. The same percentage doesn't trust this vaccine in particular. In many cases, the family doctor himself gives advice against the vaccine and its use, especially to people being not part of the "risky categories". The big part of the respondents still think about the virus as a classic flu which should pass autonomously.

Base: 544 cases

Thinking about the actual communication campaign related to the diffusion of the H1N1 virus, which of the following situations mostly reflect your point of view?

Opinion on the actual communication campaign

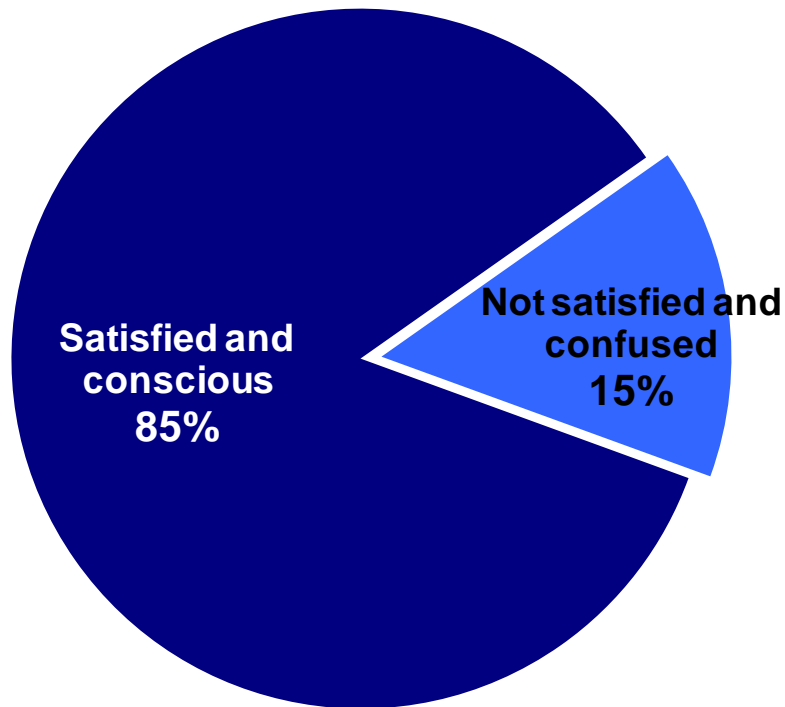
More than 70% of the sample, complains about an excessive alarmism by bodies and media. This topic has been initially focused with open questions, which have underlined suspicious “generic interests”. Afterwards, the answers have been grouped into some main topics.



Base: 594 cases

What do you think about your degree of information, with regard to the diffusion of the H1N1 virus, it is..?

Communication and consciousness



Base: 594 cases

Despite the doubts related to the excessive alarmism and economic interests related to it, 85% of the interviewed Italian families is satisfied and conscious about the diffusion of the H1N1 virus.

It is likely a kind of maturity attitude, which doesn't seem to be related to underestimation, but it is due to a correct communication methodology by media, the family doctor and the pharmacists. These latter, when consulted, have contributed to supply fundamental information to evaluate the ratio between risk and precaution.

In the end, even with some typical, stereotyped or resigned beliefs related to economic interests of this phenomena, **Italians have assumed a mature and conscious behavior.** This is also true for families with young kids, showing major risks of infection.

Tranquility but not superficiality in the big part of the sample allowed the **adoption of precautions without being panicked** or having irrational behaviors.

The collected data lead us to think about the maturity and consciousness level of the Italian population concerning the ability to collect and elaborate information to autonomously face the problem. **A critical sensibility has been showed and it has been useful to examine and decode information** with the aim to determine the behavior to assume, leaving behind the general alarmism and the media pressure.

Everything **has been facilitated by benign effects** in most of the cases, but this pandemic has certainly been overrated by the International Bodies first.

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