# School for Primary Care Research

## **INFOGRAPHICS ABOUT ANTIBIOTICS: MAKING FACTS ACCESSIBLE**

## INTRODUCTION

Public misconceptions about antibiotic use persist despite the efforts of antibiotic awareness campaigns. These campaigns have often followed a top-down approach and have not sought input from the public. Communities need to see antibiotic campaign messages as relevant, accessible and important in order to have an influence on health seeking behaviour and antibiotic use.

## **OBJECTIVES**

To develop a series of evidenced-based infographics (EBIs) on antibiotic use for common infections in children and to evaluate their effectiveness at increasing parents' understanding of antibiotic use and antibiotic resistance.

### **METHODS**

Three phases to this research.

- Phase 1: to identify and summarise scientific evidence for antibiotic use for three common infections in children (sore throat, acute cough and otitis media)
- Phase 2: to co-design a series of prototype EBIs for each infection in two focus group interviews with parents of young children, and graphic designers  $\bullet$
- Phase 3: to test the feasibility of EBIs in increasing parents' understanding about antibiotic use (\*currently in progress)

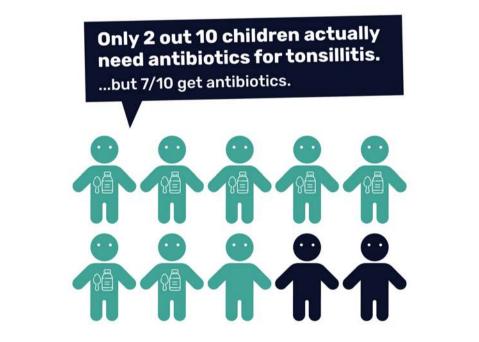
## <u>1. COUGH</u>





re than 8 out of 10

"Tonsillitis is obviously different from just a plain sore throat [...] because my reaction to the whole thing is different if it's the starting point is tonsillitis, versus if it is not." (Participant 2)



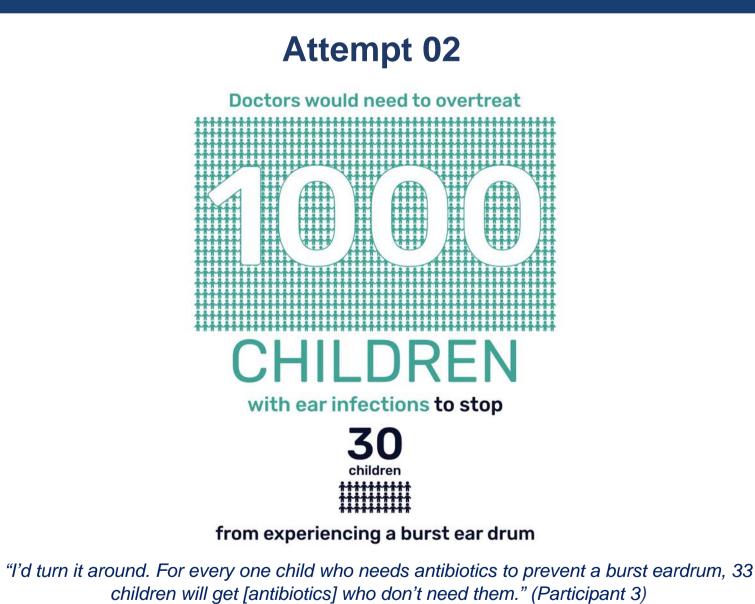
"The only thing I thought was that it looks like the people who actually need the antibiotics, don't get them." (Participant 1)

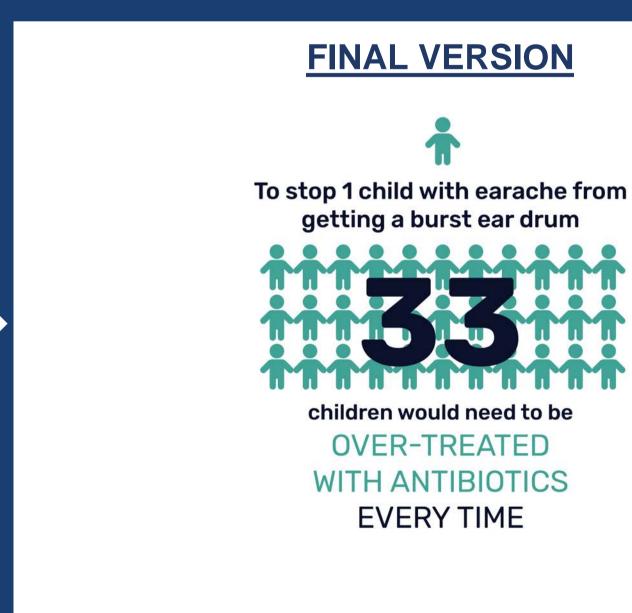


## **3. EARACHE**



"Funnily enough, it left me thinking oh gosh, 5% do [experience a burst eardrum]." (Participant





## **RESULTS**

Parents mostly found the evidence displayed in the infographics novel and relevant to their families. However for some parents, the presented evidence was either too medically-focussed where the outcome was not relevant to parents or not of immediate concern to parents. The manner in which the information was displayed influenced their understanding e.g. difficulty interpreting graphs. Superfluous components of the infographic were often questioned. Parents preferred one health message per visual using accurate and consistent terminology to avoid misinterpretation.

## **IMPLICATIONS**

This proof-of-concept study is a work in progress. We have co-developed a series of EBIs with parents and professional graphic designers and identified how parents interpret EBIs on antibiotic use and antibiotic resistance. Phase 3 will evaluate whether EBIs can increase parents' understanding about antibiotic use. If shown to be beneficial, this will inform novel approaches to improving antibiotic stewardship initiatives in the community.

#### ACKNOWLEDGEMENTS

Parents who helped co-design the infographics.

Our helpful graphic designers in Oxford, Monchu Graphic Designers.

#### **FUNDING**

The VICAR Study is funded by an NIHR SPCR grant (Ref. no: 439). The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.

Oliver van Hecke, Joseph Lee, Chris Butler, Michael Moore, Sarah Tonkin-Crine

oliver.vanhecke@phc.ox.ac.uk 

@olivervanhecke



