EMA communication perception survey 2017
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Background

In May 2017, the European Medicines Agency (EMA) carried out a survey on its communication activities. The purpose was to assess, qualitatively and quantitatively, how EMA’s communication to the public is perceived and valued by its partners and stakeholders and whether they are satisfied with the services provided. The results will be used to monitor communication perception and support continual improvement of communication activities and products.

Knowledge on EMA communication perception has already been gained from the first survey of this kind, which was carried out in 2015. The results coming from the 2015 survey led to recommendations that were used to develop EMA’s framework strategy for external communication 2016–2020 and the results from both surveys will continue to guide the development of the Agency’s annual communication plans. The survey questions have been prepared in collaboration with the University of Sheffield.

Methodology

The survey comprised three questionnaires in total: one for partners, one for stakeholders and one for website visitors. The three questionnaires were similar, but the one to partners also aimed at capturing the level of satisfaction with EMA’s efforts to coordinate key information within the EU Regulatory Network.

The questionnaires focused on EMA communication activities to the general public (i.e. EMA information made public mainly through the EMA website such as press releases and news announcements). They did not relate to communication between stakeholders and EMA as part of regular or technical interaction with EMA (e.g. communications between companies and EMA staff in the context of an evaluation procedure or any other information exchange under working arrangements).
Targeted respondent groups

- **Partners:** European Union (EU)/European Economic Area (EEA) national competent authorities (human and veterinary), the European Commission, the European Parliament, EU agencies, health technology assessment and reimbursement bodies, non-EU regulatory authorities and the World Health Organization (WHO). In addition, EMA scientific committees and coordination groups (human and veterinary) were also asked to respond.

- **Stakeholders:** patients’ and consumers’ organisations, non-governmental organisations (NGOs), healthcare professionals’ organisations, academic institutions, media outlets, farmers’ organisations and pharmaceutical industry organisations.

The survey was sent to specific individuals in each group/organisation. These included, where possible and applicable, the head of the organisation and established contact points between the organisation and EMA, as well as communication focal points.

- **Website users:** the survey was available on the EMA website from 10 May 2017 to 2 June 2017, and featured on the homepage for two weeks during this period.

Response rate

1,774 selected individuals were asked to fill in the questionnaire (986 stakeholders and 788 partners). Of these, 417 (252 stakeholders and 165 partners) responded. The response rate was 23%.

A total of 198 responses were received through the EMA website and these were analysed separately from targeted stakeholders and partners. In addition, the survey was published on the Agency’s Twitter account (@EMA_News, which had approximately 32,500 followers at the end of 2017) twice (11 May and 31 May, 2017), resulting in 20 responses. As the response level from Twitter was low, these responses were reviewed qualitatively and were not included in the quantitative analysis performed for partners, stakeholders or web visitors.

The response rate from media representatives was low (around 11% of those contacted responded, making up 10% of total stakeholder responses). EMA runs separate, targeted surveys for this stakeholder group taking into account their specific needs.

Combining stakeholders, partners and web users, a total of 615 responses were analysed.

Partner and stakeholder feedback

Following analysis of the survey results, these were shared with a group of representatives from patient and healthcare professional organisations, academia, the human and veterinary pharmaceutical industries and national competent authorities. During a meeting with the group and EMA, key outcomes were presented and discussed. This enabled validation, further shaping and enrichment of the conclusions of the analysis.
Respondent profiles

In each survey, respondents were asked ‘who are you?’ to provide an overview of the profession or affiliation of respondents.

EMA partner profile

The majority (61%) of respondents came from the national competent authorities of the EU Member States/EEA countries, which is a partner group with which EMA is in direct and regular contact.

EMA stakeholder profile

Stakeholders who responded to the survey were distributed across a range of stakeholder types, including academia, healthcare professional and patient organisations, pharmaceutical industry associations, media and health technology assessment bodies.
Members of the pharmaceutical industry made up the majority of respondents to the web survey at 60%. The remaining 40% were divided among EMA’s other stakeholder groups, including academia, healthcare professionals, patients and the public, regulators and media.
Highlights of the results

- Overall satisfaction with EMA communications was high, with 82% of respondents rating EMA communications to the public positively. Communications scored highly when rated for usefulness, objectivity, clarity, timeliness, ease of understanding, and completeness (61-94% positive responses). Features such as availability of translations, accessibility, and means used to communicate scored less well (39-65%).

- EMA communications material is used frequently: 83% of all respondents use EMA communications once a month or more and 24% every day. The materials are mostly used for information (62% of respondents), but also significant numbers use communications for work reasons (94% web visitors) and for research (57% stakeholders), to align their organisations own communications (55% partners, 29% stakeholders, 26% web visitors), for teaching materials (36% stakeholders) and as the basis for their own news stories (23% stakeholders).

- Stakeholders and partners are actively involved in dissemination, both internally within their organisations (80% partners, 57% stakeholders) and externally through their organisation’s website (28% partners, 24% stakeholders). Of web respondents, 42% said they disseminate EMA communications.

- Of the EMA communication tools, press releases/news items have the highest awareness and use among respondents (84%). Most other EMA communication tools have awareness ranging between 30-80%; however some, such as the AskEMA service for answering external queries (12% of all respondents) and the EMA catalogue on medicine shortages (17% respondents) have low awareness.

- Respondents largely agreed that EMA is open and transparent in its activities (77% agree) and engages sufficiently with stakeholders (66% agree).

- EMA’s work to coordinate information within the EU regulatory network, via EMA’s early notification system (ENS) and distribution of lines-to-take (LTT) on key issues is valuable to participating partners. There was very strong agreement on the usefulness of both tools (95% ENS, 92% LTT) and on the timeliness (87%) and efficiency (92%) of the ENS.
Comparison of results from 2015 and 2017

Most questions in the 2017 survey were the same or similar to those asked in 2015 to enable comparison of results. Results were compared for responses from stakeholders and partners on topics of use, awareness, quality and coordination of information in the network. Results from web visitors were not included in the comparison, as this group was not surveyed in 2015.

- Overall satisfaction has increased: When asked how they rated EMA’s communication to the public overall, in 2015, 77% of partners and 58% of stakeholders were positive. In 2017, these percentages were increased to 88% of partners and 78% of stakeholders.

- Rating of quality has increased for all aspects except translations: Respondents rating EMA positively for the quality parameters timeliness, clarity, understandability, accessibility, means used, usefulness, completeness and objectivity increased by around 5-10 percentage points in 2017. However, ratings for the translations of communications was down by 8 percentage points (partners) and 14 percentage points (stakeholders). This decrease may be at least partly due to a change in the wording of the question asked. In 2015, the question was: 'Which of the following EMA communication tools and materials are you aware of?' In 2017, the question was: 'Which of the following EMA communication tools and materials have you used recently or are you aware of?' Due to the increased specificity of the question in 2017, it may be that the 2017 results more closely reflect use rather than awareness of the various communications.

- Use is similar but dissemination is higher in 2017: In both 2015 and 2017, most respondents said that EMA is indispensable or important for their organisation (2015: 96% partners and 81% stakeholders; 2017: 94% partners and 83% stakeholders). In both years, most respondents used communication material frequently. In both years, communications were mainly used for respondents’ own information. However, the results indicated increased dissemination of material: a higher percentage of respondents said that they used EMA communications to align their own communications (2015: 36% partners and 18% stakeholders; 2017: 55% partners and 29% stakeholders). The percentage that said that they linked to EMA from their organisation's website also increased significantly (2015: 8% partners and 4% stakeholders; 2017: 31% partners and 17% stakeholders).

- Awareness of tools is lower: Participants were asked about their awareness of a range of EMA communications, including media communications, summaries for the public and other tools. The results for all communications were down by around 5-20 percentage points in 2017 compared with 2015, except for EMA newsletters, which decreased by 31 percentage points (partners) and 34 percentage points (stakeholders). The decrease may be at least partly due to a change in the wording of the question asked. In 2015, the question was: 'Which of the following EMA communication tools and materials are you aware of?' In 2017, the question was: 'Which of the following EMA communication tools and materials have you used recently or are you aware of?' Due to the increased specificity of the question in 2017, it may be that the 2017 results more closely reflect use rather than awareness of the various communications.

- Higher network satisfaction on coordination of information among the network of regulators: Both in 2015 and 2017, partners who received EMA’s early notification system messages and LTT were highly positive about the usefulness, timeliness and efficiency of EMA’s information sharing with the network. These ratings were increased by around 10-15 percentage points in 2017.
Conclusions — key outcomes and areas for improvement

Key conclusions from the survey results include the following:

- The high level of dissemination of EMA communications by survey respondents showed that outreach capacity through multipliers is a valuable asset for EMA. This resource may be currently underutilised due to lack of awareness of the full range of EMA communication tools and lack of appropriate translations.

- Quality perception for EMA communications is high over a range of features and has increased since 2015. This may reflect several strands of work including processes and criteria for communication, lay language writing and glossary development, patient and healthcare professional reviews, website rewriting, and commitment to stakeholder engagement and transparency.

- Coordination and distribution of communication messages, through the national regulatory network, is highly appreciated by partners. These activities ensure consistent messages across the network on key topics and support communication preparedness.

The survey highlighted areas in communication that could be optimised by EMA. These include:

- optimising findability of information on the EMA website to facilitate easier access to all relevant information for a particular stakeholder at the point of need;

- continuing to increase ease of understanding of EMA communications to ensure they are usable and accessible to non-experts;

- increasing awareness and use of the full range of EMA communication tools;

- exploring and expanding the scope and variety of communication tools and platforms used;

- increasing communication material available in languages other than English;

- expanding and making better use of social media.

A stakeholder/partner representatives group discussed the results of the survey. The group’s feedback raised the following points:

- Respondents to the survey were targeted partners and stakeholders and users of the EMA website. In addition, the subset of these who took the time to complete the survey likely reflect a particularly engaged group. This means that the results reflect the perceptions of people already engaged with EMA, and likely do not reflect the views of all stakeholders/partners, especially those who are not regular users of EMA information. This must be carefully considered when interpreting the results. It would also be useful in future surveys to seek opinions of less actively engaged consumers of EMA communication materials. Methods to capture input from these other groups could be investigated with input from academic collaborators.

- There is strong agreement that the dissemination capacity of EMA’s network of stakeholders and partners is a valuable asset enabling wider reach to EU citizens than would be possible using EMA resources alone. This supports EMA’s current approach to communication and engagement.

- Effective communication is an essential aspect of transparency. It is not sufficient to only publish information, but in addition it should always be contextualised and easy for relevant stakeholders to find. The quantity of the information published should not impact quality standards, which should remain high.

- Targeted communication and wider use of new tools is desirable, however use of new tools must ensure that investment of resources achieves strategic communication targets. Even without additional resources, existing tools can be used in a more targeted way.

- Relocation of EMA to the Netherlands and the effects of Brexit may have an impact on awareness of the Agency and communication perception. This may be measured in future surveys.

These conclusions will inform EMA’s ongoing communication goals and planning.
Findings
Questions on web and tools — all respondents
Website and communication tools

Survey participants were asked about their use of the EMA website and communication tools they would like EMA to use. The results for partners, stakeholders and web visitors are summarised in the graphics below.

Which aspects of the EMA website do you find most useful?
Is there anything you think should be improved about the EMA website?

The following are the sections of the website that were cited as being most useful, and the features of the website that should be improved.

Which communication tools and materials should EMA use to reach out to its stakeholders?

Participants gave their opinions on communication tools that should be used by EMA. Some of the most frequently mentioned suggestions are shown.
Findings
Questionnaire for partners
Importance of EMA for partner organisation

How essential is EMA for your organisation?

The majority of respondents indicated that EMA is indispensable or important for their organisation, reflecting the pivotal role EMA plays within the EU regulatory network.

Use and awareness of EMA communication tools

How often do you use (e.g. read, disseminate, reproduce, etc.) public communication material prepared by EMA?

Reflecting the high importance of EMA for partner organisations, EMA communication material is used frequently, with 90% of partners using it once a month or more.
For which purpose do you use public communication material prepared by EMA?

Most partners (86%) use EMA communication material for their own information, and a large majority also disseminate it by aligning their own communications (55%) or linking to EMA material (31%). Among respondents who answered ‘other’, answering queries and preparing presentations were cited.

Do you disseminate information provided in EMA communications?

The high level of dissemination by partners, both internally within their organisations (80%) and externally (28%), is a valuable resource. Partners who answered ‘other channels’ noted that they disseminate via social media, meetings, answers to queries, newsletters, targeted e-mails and presentations.
Use and awareness varies greatly across EMA communication materials. Press releases/news items, which are the most visible materials featuring on the EMA homepage, are most widely known and used. While the EMA website is universally known, other digital platforms such as Twitter, RSS feeds and YouTube are not well known or used.
Communication quality
How do you rate EMA’s overall communication to the public?

EMA’s communication had a high overall positive rating, with 88% respondents rating it very or mostly positively.

How do you rate these quality parameters?

Usefulness, timeliness, clarity and objectivity scored highest with partners, ease of understanding and completeness scored less well and means used, accessibility and translations scored lowest. Respondents answering ‘Don’t know’ for the quality parameters were between 0 and 4%, with the exception of ‘Means used’ (8%) and ‘Translations’ (17%).
Coordination within the EU regulatory network
Early Notification System (ENS) and Lines-to-Take (LTT)

Positive ratings for the ENS and LTT demonstrated that these services are greatly appreciated and used by partners who receive them (around half of partners who responded to the survey receive the ENS [88] and LTT [82]).

**For which purpose do you use lines-to-take?**

Partners said they use LTT circulated by EMA for their own information and to respond to media and stakeholder queries. It was commented that LTT ensure consistency in the messages given by EMA and national authorities.
Transparency

Do you agree EMA is sufficiently open and transparent in its activities?

In your opinion, how open and transparent is EMA compared with other regulatory authorities worldwide?

EMA is open and transparent according to 81% of partners. The survey also asked respondents to compare it with other regulatory authorities: while 40% felt EMA was more transparent than other authorities and only 2% thought EMA was less transparent, a high percentage (25%) answered ‘I don’t know’ to this question.
Engagement

Do you agree that EMA is sufficiently engaging stakeholders (e.g. patients, healthcare professionals, academia, industry, media) in its activities?

While 75% of partners agreed that EMA engages sufficiently with stakeholders, 41% did not know how EMA compared with other organisations.
Findings
Questionnaire for stakeholders
Importance of EMA for stakeholder organisation

How essential is EMA for your organisation?

EMA is important or indispensable for 83% of stakeholder organisations.

Use and awareness of EMA communication tools

How often do you use (e.g. read, disseminate, reproduce, etc.) public communication material prepared by EMA?

As a result of the high importance of EMA for these stakeholders, EMA communication material is used frequently, with 70% using it once a month or more.
For which purpose do you use public communication material prepared by EMA?

Due to the variety of EMA stakeholders, various options were given as answers to this question. Many stakeholders (59%) use EMA communication material for their own information, for research (57%), for teaching (36%), and for writing news stories (23%). Stakeholders also align their own communications or link to EMA material from their organisations’ websites.

Do you disseminate information provided in EMA communications?

57% of stakeholders disseminate EMA communications within their organisations, and almost a quarter disseminate externally through their organisations’ websites. Stakeholders who answered ‘other channels’ noted that they disseminate via social media, meetings, lectures, newsletters, targeted e-mails, presentations and publications.
Which of the following EMA communication tools and materials have you used recently or are you aware of?

As seen for partners, press releases/news items are most widely known and used, while the EMA service for answering queries, AskEMA, is the least known communication tool.

As seen for partners, press releases/news items are most widely known and used, while the EMA service for answering queries, AskEMA, is the least known communication tool.
Communication quality

How do you rate EMA’s overall communication to the public?

EMA’s communication had a high overall positive rating among stakeholders of 78%.

How do you rate these quality parameters?

Mirroring the results seen for partners, usefulness, objectivity, clarity and timeliness scored highest with stakeholders, ease of understanding and completeness scored less well and means used, accessibility and translations scored lowest. Respondents answering ‘Don’t know’ for the quality parameters were between 0 and 4%, with the exception of ‘Means used’ (8%) and ‘Translations’ (24%).
Transparency

Do you agree EMA is sufficiently open and transparent in its activities?

In your opinion, how open and transparent is EMA compared with other regulatory authorities worldwide?

EMA is open and transparent according to 74% of stakeholders. When comparing EMA with other authorities, 73% considered EMA was the same as or more transparent than others, and 23% answered 'I don’t know' to this question. Only 4% considered that it was less transparent than others.
Engagement

Do you agree that EMA is sufficiently engaging stakeholders (e.g. patients, healthcare professionals, academia, industry, media) in its activities?

62% of stakeholders agreed that EMA engaged sufficiently with stakeholders, and 64% considered EMA was as good or better at engagement than other organisations. 31% did not know how EMA compared with other organisations for engagement.

How do you rate EMA’s engagement with stakeholders compared to other international institutions and/or regulatory authorities worldwide?

62% of stakeholders agreed that EMA engaged sufficiently with stakeholders, and 64% considered EMA was as good or better at engagement than other organisations. 31% did not know how EMA compared with other organisations for engagement.
Findings
Questionnaire for web visitors
Importance of EMA

How important is the information provided by EMA for you?

Almost all web respondents indicated that EMA information is important for them, which is as expected given that they reached the survey by seeing it on the EMA website.

Use and awareness of EMA communication tools

How often do you use (e.g. read, disseminate, reproduce, etc.) public communication material prepared by EMA?

Web respondents represent highly engaged stakeholders. They are the most frequent users, with 82% using EMA communication material once a week or more (compared to 69% partners and 38% stakeholders).
Most web visitors use EMA communications in their work (94%) and for their own information (46%). A significant proportion of 42% also disseminate and 26% say they use the material to align their own communications.
Which of the following EMA communication tools and materials have you used recently or are you aware of?

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<th>Communication Tool</th>
<th>Awareness (%)</th>
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<tr>
<td>EMA press releases/news items</td>
<td>85%</td>
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<td>CHMP meeting highlights</td>
<td>77%</td>
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<td>EPAR summaries</td>
<td>71%</td>
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<td>PRAC meeting highlights</td>
<td>67%</td>
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<tr>
<td>Summaries of CHMP opinions</td>
<td>66%</td>
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<tr>
<td>EMA workshops/conference reports</td>
<td>57%</td>
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<tr>
<td>Safety communications</td>
<td>55%</td>
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<td>EMA annual report</td>
<td>51%</td>
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<td>EMA newsletters</td>
<td>44%</td>
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<tr>
<td>Summaries of orphan designation</td>
<td>40%</td>
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<tr>
<td>AskEMA – service for answering external queries</td>
<td>24%</td>
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<tr>
<td>Targeted e-mails of relevant information</td>
<td>22%</td>
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<tr>
<td>EMA catalogue on medicines shortages</td>
<td>15%</td>
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Web respondents reported higher use and awareness of communication tools than partners and stakeholders. As for the other groups, the highly visible press releases/news items are most used. Web respondents’ awareness of the AskEMA service was much higher, at 24%, than that of partners (7%) or stakeholders (6%).
Communication quality
How do you rate EMA’s overall communication to the public?

EMA’s communication had a high overall positive rating among web respondents, with 81% rating it very or mostly positively.

How do you rate these quality parameters?

The trend of quality ratings for web respondents followed that of the partner and stakeholder surveys, with usefulness, objectivity, clarity and timeliness scoring highest, ease of understanding and completeness scoring less well, and means (tools) used, accessibility and translations scoring lowest. Respondents answering ‘Don’t know’ for the quality parameters were between 0 and 5%, with the exception of ‘Ease of understanding’ (7%) and ‘Translations’ (23%).
Transparency

Do you agree EMA is sufficiently open and transparent in its activities?

77% of web visitors said EMA is sufficiently open and transparent.

Engagement

Do you agree that EMA is sufficiently engaging stakeholders (e.g. patients, healthcare professionals, academia, industry, media) in its activities?

While 65% of web visitors agreed that EMA engaged sufficiently with stakeholders, 11% disagreed. Comments mentioned the EMA being unknown to many academics, patients and the general public and the fact that it should work to widen engagement by increasing its visibility.
Survey questions
Partners survey

Partners were asked the following questions:

1. Who are you? (I work at: EU Agency; EU/EEA National Competent Authority; European Commission; European Parliament; Non-EU Regulatory Authority; WHO; Other)

2. What position do you hold within your organisation?

3. How essential is EMA for your organisation? (Indispensable — Not important)

4. Which of the following EMA communication tools and materials have you used recently or are you aware of? (Digital communications: EMA Website; YouTube channel; Twitter account; RSS feeds. Media communications: EMA press releases/news items; CHMP meeting highlights; PRAC meeting highlights. Summaries for the public: EPAR summaries; Safety communications (EMA Public Health Communications); Summaries of orphan designations; Summaries of CHMP opinions; EMA catalogue on medicines shortages. Others: EMA workshop/conference reports; EMA annual report; Service for answering external queries (AskEMA); EMA newsletters (e.g. Human Medicines Highlights, SME newsletter); Targeted e-mails of relevant information.)

5. Which aspects of the EMA website do you find most useful?

6. Is there anything you think should be improved about the EMA website?

7. In addition to the previous ones, in your opinion, which other communication tools and materials should EMA use to reach out to its stakeholders?

8. How often do you use (e.g. read, disseminate, reproduce, etc.) public communication material prepared by EMA? (Everyday — Less than a few times a year)

9. Within your organisation, for which purpose do you use public communication material prepared by EMA? (For my organisation’s own information; As a basis to align my organisation’s own communications; To link to it from my organisation’s website; Other)

10. Do you disseminate information provided in EMA communications? (No; Yes, I disseminate internally within my organisation; Yes, I disseminate externally through my organisation’s website; Yes, I disseminate through other channels)

11. How do you rate EMA’s overall communication to the public? (Very positively — Very negatively)

12. Please rate the following aspects of EMA’s communication to the public (Strongly agree — Strongly disagree, Don’t know):
   - Timeliness – EMA communications material is available when I need it
   - Clarity – the key messages in EMA communications materials are clear and well presented
   - Ease of understanding – the language used is understandable for non-expert users
   - Translations – the use of languages other than English in EMA communications is sufficient and wider use of other EU languages is not necessary
   - Accessibility – I can easily find the information I am looking for in the EMA website
   - Means used to communicate – EMA makes good use of various communication tools
   - Usefulness – EMA communication materials are useful for me or my work
   - Completeness – EMA communication materials provide all the information I need
   - Objectivity – EMA communication materials provide me with balanced information about medicines

13. Do you receive EMA’s Early Notification System messages (EMA distribution of important safety information within the EU Regulatory Network)?
   - If yes: Please rate the following aspects of EMA’s work in coordinating important safety information within the EU Regulatory Network (Strongly agree — Strongly disagree, Don’t know):

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EMA is efficient in coordinating important public information within the EU Regulatory Network

I am made aware well in advance of important EMA public information before it is published on the EMA website

Receiving EMA communication under publication embargo is useful to plan communications within my organisation

I receive EMA communication under embargo in a timely way

14. Do you receive EMA’s Lines-to-Take?
   
   If yes:
   
   Do you agree that EMA’s Lines-to-Take are useful in supporting communication activities in your organisation? (Strongly agree — Strongly disagree, Don’t know)

   For which purpose do you use Lines-to-Take? (To reply to media queries; For my organisation’s own information; To reply to queries from other stakeholders; Other)

15. Do you agree EMA is sufficiently open and transparent in its activities? (Strongly agree — Strongly disagree, I don’t know)

16. In your opinion, how open and transparent is EMA compared with other regulatory authorities worldwide? (More open and transparent than others; The same as others; Less transparent than others; I don’t know)

17. Do you agree that EMA is sufficiently engaging stakeholders (e.g. patients, healthcare professionals, academia, industry, media) in its activities? (Strongly agree — Strongly disagree; I don’t know)

18. How do you rate EMA’s engagement with stakeholders compared to other international institutions and/or regulatory authorities worldwide? (EMA is better at engaging with stakeholders than others; EMA is just as good at engaging with stakeholders as others; EMA is worse at engaging with stakeholders than others; I don’t know)

19. Are you aware of any practice or initiative that other regulatory authorities may have in place to engage with stakeholders and from which EMA could learn?

20. Do you have any additional comment or suggestion on how EMA could overall improve its communication to the public?
Stakeholders survey

Stakeholders were asked the following questions:

1. Who are you? (I work at: Academia; Farmers’ Organisation; Healthcare Professional Organisation; Health Technology Assessment Body; Media; Patient or Consumer Organisation/NGO; Pharmaceutical Industry Association (Human); Pharmaceutical Industry Association (Vet); Other)

2. What position do you hold within your organisation?

3. How essential is EMA for your organisation? (Indispensable — Not important)

4. Which of the following EMA communication tools and materials have you used recently or are you aware of? (Digital communications: EMA Website; YouTube channel; Twitter account; RSS feeds. Media communications: EMA press releases/news items; CHMP meeting highlights; PRAC meeting highlights. Summaries for the public: EPAR summaries; Safety communications (EMA Public Health Communications); Summaries of orphan designations; Summaries of CHMP opinions; EMA catalogue on medicines shortages. Others: EMA workshop/conference reports; EMA annual report; Service for answering external queries (AskEMA); EMA newsletters (e.g. Human Medicines Highlights, SME newsletter); Targeted e-mails of relevant information.)

5. Which aspects of the EMA website do you find most useful?

6. Is there anything you think should be improved about the EMA website?

7. In addition to the previous ones, in your opinion, which other communication tools and materials should EMA use to reach out to its stakeholders?

8. How often do you use (e.g. read, disseminate, reproduce, etc.) public communication material prepared by EMA? (Everyday — Less than a few times a year)

9. Within your organisation, for which purpose do you use public communication material prepared by EMA? (For my organisation’s own information; As a basis to align my organisation’s own communications; To link to it from my organisation’s website; To use as background information for my research; For teaching/lectures/study materials; To use as a basis for news stories; Other)

10. Do you disseminate information provided in EMA communications? (No; Yes, I disseminate internally within my organisation; Yes, I disseminate externally through my organisation’s website; Yes, I disseminate through other channels)

11. How do you rate EMA’s overall communication to the public? (Very positively — Very negatively)

12. Please rate the following aspects of EMA’s communication to the public (Strongly agree — Strongly disagree, Don’t know):
   - Timeliness – EMA communications material is available when I need it
   - Clarity – the key messages in EMA communications materials are clear and well presented
   - Ease of understanding – the language used is understandable for non-expert users
   - Translations – the use of languages other than English in EMA communications is sufficient and wider use of other EU languages is not necessary
   - Accessibility – I can easily find the information I am looking for in the EMA website
   - Means used to communicate – EMA makes good use of various communication tools
   - Usefulness – EMA communication materials are useful for me or my work
   - Completeness – EMA communication materials provide all the information I need
   - Objectivity – EMA communication materials provide me with balanced information about medicines

13. Do you agree EMA is sufficiently open and transparent in its activities? (Strongly agree — Strongly disagree, I don’t know)
14. In your opinion, how open and transparent is EMA compared with other regulatory authorities worldwide? (More open and transparent than others; The same as others; Less transparent than others; I don't know)

15. Do you agree that EMA is sufficiently engaging stakeholders (e.g. patients, healthcare professionals, academia, industry, media) in its activities? (Strongly agree — Strongly disagree; I don't know)

16. How do you rate EMA’s engagement with stakeholders compared to other international institutions and/or regulatory authorities worldwide? (EMA is better at engaging with stakeholders than others; EMA is just as good at engaging with stakeholders as others; EMA is worse at engaging with stakeholders than others; I don’t know)

17. Are you aware of any practice or initiative that other regulatory authorities may have in place to engage with stakeholders and from which EMA could learn?

18. Do you have any additional comment or suggestion on how EMA could overall improve its communication to the public?
Web visitors survey

Web visitors were asked the following questions:

1. Who are you? (I am: Member of the public; Patient or consumer; Carer; Healthcare professional; Veterinarian; Farmer; Academic; Pharmaceutical Industry; Journalist; Not-for-profit organisation; EU institution; EU National Competent Authority; Regulator outside EU; Other)

2. How important is information provided by EMA for you? (Indispensable — Not important)

3. Which aspects of the EMA website do you find most useful?

4. Is there anything you think should be improved about the EMA website?

5. Which of the following EMA communication tools and materials have you used recently or are you aware of? (Media communications: EMA press releases/news items; CHMP meeting highlights; PRAC meeting highlights. Summaries for the public: EPAR summaries; Safety communications (EMA Public Health Communications); Summaries of orphan designations; Summaries of CHMP opinions; EMA catalogue on medicines shortages. Others: EMA workshop/conference reports; EMA annual report; Service for answering external queries (AskEMA); EMA newsletters (e.g. Human Medicines Highlights, SME newsletter); Targeted e-mails of relevant information.)

6. In addition to the previous ones, in your opinion, which other communication tools and materials should EMA use to reach out to its stakeholders?

7. How often do you use (e.g. read, disseminate, reproduce, etc.) public communication material prepared by EMA? (Everyday — Less than a few times a year)

8. For which purpose do you use public communication material prepared by EMA? (For my own information; For my work; As a basis to align my own communications; To disseminate the information provided; Other)

9. How do you rate EMA’s overall communication to the public? (Very positively — Very negatively)

10. Please rate the following aspects of EMA’s communication to the public (Strongly agree — Strongly disagree, Don’t know):

   - Timeliness – EMA communications material is available when I need it
   - Clarity – the key messages in EMA communications materials are clear and well presented
   - Ease of understanding – the language used is understandable for non-expert users
   - Translations – the use of languages other than English in EMA communications is sufficient and wider use of other EU languages is not necessary
   - Accessibility – I can easily find the information I am looking for in the EMA website
   - Means used to communicate – EMA makes good use of various communication tools
   - Usefulness – EMA communication materials are useful for me or my work
   - Completeness – EMA communication materials provide all the information I need
   - Objectivity – EMA communication materials provide me with balanced information about medicine

11. Do you agree EMA is sufficiently open and transparent in its activities? (Strongly agree — Strongly disagree, I don’t know)

12. Do you agree that EMA is sufficiently engaging stakeholders (e.g. patients, healthcare professionals, academia, industry, media) in its activities? (Strongly agree — Strongly disagree; I don’t know)

13. Do you have any additional comment or suggestion on how EMA could overall improve its communication to the public?