

Crisis communication in the framework of preparedness for health emergencies

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BEST PRACTICES IN IMPLEMENTING
INTERNATIONAL HEALTH REGULATIONS (IHR)

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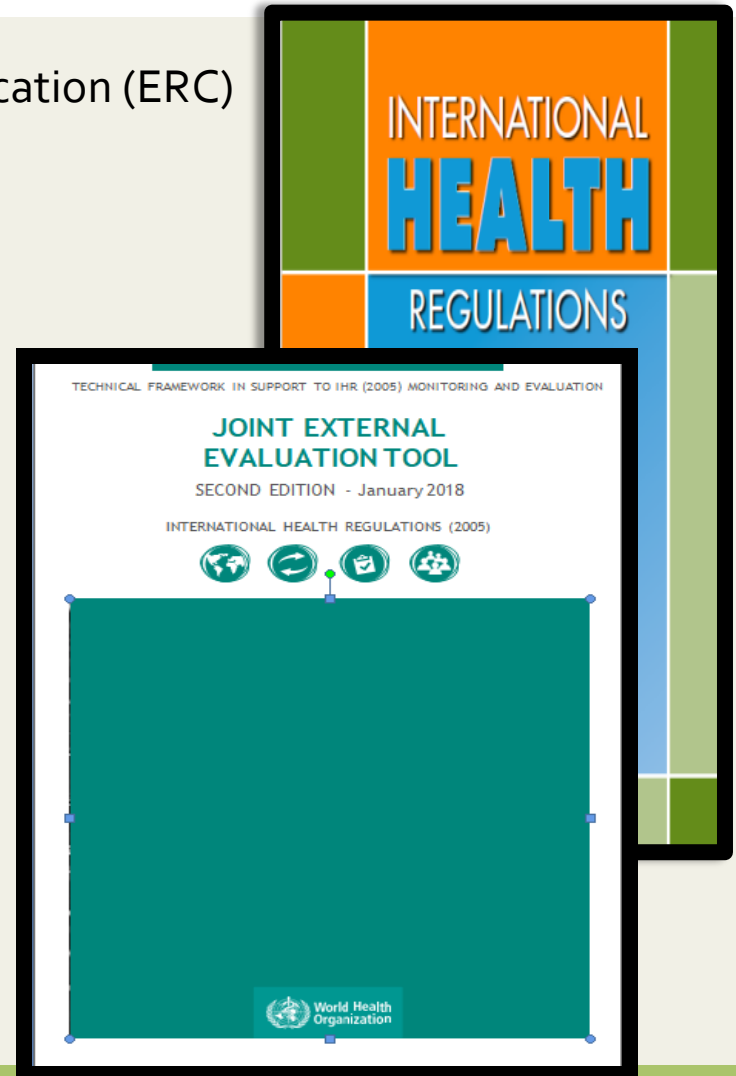
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Communication within the IHR Framework



Crisis Communication = Emergency Risk Communication (ERC)

- ERC is a **public health intervention** essential to emergency control.
- ERC is one of the 8 **IHR (2005) core functions**.
- Operationalized in the **Joint External Evaluation Tool**.



EMERGENCY RISK COMMUNICATION



NEWS MEDIA

Opinions Concerns

STAKEHOLDER

ENGAGEMENT

Multi-level

Real-time Exchange

Information

Advice

MASS AWARENESS CAMPAIGNS

Multi-sectoral

UNEXPECTED

Unusual

RISK COMMUNICATION CAPACITY

FOR PUBLIC HEALTH EMERGENCIES

DOCTOR-PATIENT COMMUNICATION

Multi-faceted

BEHAVIOR CHANGE COMMUNICATION

SOCIAL

COMMUNITY ENGAGEMENT

HEALTH PROMOTION

MEDIA

The GOAL



- 1. Ensuring the public has information when they need it to take actions to protect**
 - themselves,**
 - their families,**
 - and their community****from disease and associated economic threats.**

- 2. Maintain trust in health authorities.**

IHR Building Blocks Risk Communication



Communication Infrastructure

(Personnel, roles, SOPS, budgets)

Message Development and Delivery

(tailoring, multi-channel, clearance, trained spokespersons)

Coordination


(mechanisms for coordinated information release, identification of lead agencies)

Community Engagement

(Monitor, detect, respond to public perceptions; two-way flow of information; involving communities)

Challenges



- Achieving the goals of risk communication within the context of
 - Uncertainty 
 - Public Risk Perception

Dynamics of Uncertainty



Limited scientific knowledge



Greater public stress/worry



Increased demand for answers

Uncertainty persists with changes over time: Zika virus



Moves Africa
to Asia

Pacific
Islands
outbreak

Brazil outbreak
1st in the Americas

1st diagnosis of intrauterine
Transmission

14 reported
human cases

Cabo Verde/Colombia
outbreaks

3893 cases of microcephaly
reported in Brazil

Yap Island outbreak

Brazil microcephaly cases

1952-2007

2013-2014

2015



2016

WHO
declares
PHEIC
02/01/2016

Uncertainties for the WHO Emergency Committee

01 February 2016



- Why does Brazil have the highest concentration?
- Why no cases of microcephaly in Colombia?
- What is the relationship between Zika and CNS disorders ?
- How big is the global threat?
- How did Zika get to the Americas?
- Why is this exploding now?

(a month later)

- Can this be transmitted sexually?



Implications of Uncertainty



- Changes in recommendations and characterization of the situation
 - People may think earlier information was a “mistake”—lowers trust.
 - People don’t attend to every change, increasing possibility of confusion—some people responding to earlier information.
 - Success in using broad networks to distribute information, means that every change has to be distributed and updated through same networks—complex, affected by human error.

Managing uncertainty through communication

Communicate early and often—despite uncertainty.

Acknowledge and communicate about uncertainty.

Set expectations for change as investigation continues.



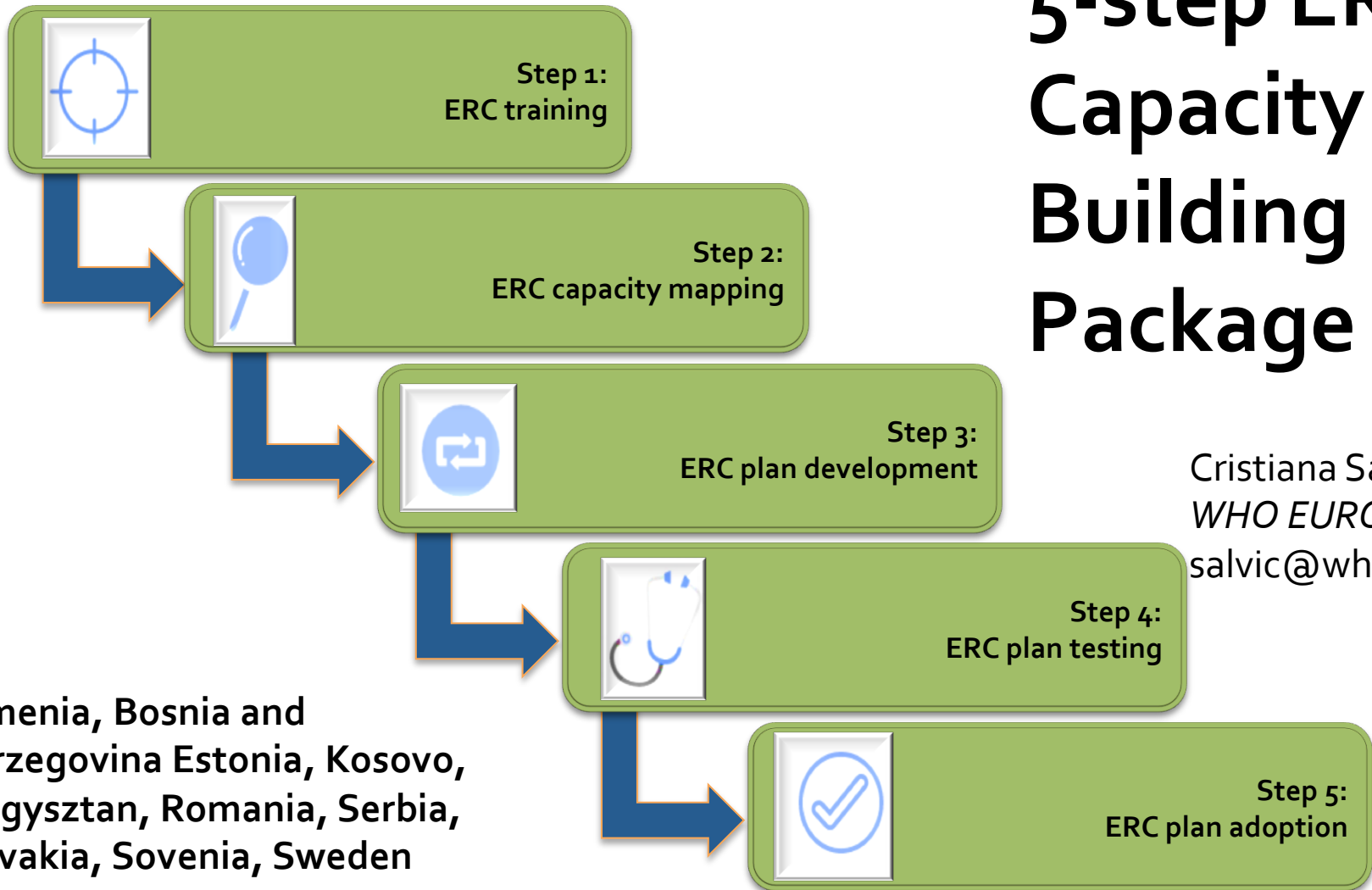
Communicating risk in public health emergencies

A WHO guideline for emergency risk communication (ERC) policy and practice



5-step ERC Capacity Building Package

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Armenia, Bosnia and Herzegovina
Estonia, Kosovo, Kyrgyzstan, Romania, Serbia, Slovakia, Slovenia, Sweden
Tajikistan, Turkey, Turkmenistan and Ukraine –plus Kosovo