

Crisis and Outbreak Communication Pandemic Flu and Other Disasters

Bryna Brennan
Special Advisor, Social and Media Communication
Pan American Health Organization

9 May 2007



**Pan American
Health
Organization**

Objective of the Session

- Understanding of crisis/outbreak communication
- Communication crucial to managing crisis
- Explain WHO Outbreak Guidelines
- Working with the media



**Pan American
Health
Organization**

Effective Communication

1. **Commands Attention**
2. Communicates a benefit
3. Caters to the HEART and HEAD
4. Calls to Action
5. Is Clarify messages
6. Consistent
7. Creates trust



Effective Communication Can:

- Clarify and prepare
- Help people make informed decisions
- Minimize resentment from people feeling excluded
- Maintain norms or change the status quo
- Minimize morbidity
- Save lives



Crisis and Outbreak Communication

The attempt by science or public health professionals to provide information that allows an individual, stakeholders, or an entire community to make the best possible decisions during a crisis emergency about their well being.

Often this communication must be done within nearly impossible time constraints and requires public acceptance of the imperfect nature of the available choices for action.*

- CDC



**Pan American
Health
Organization**

Crisis and Outbreak Communication

An interactive process of exchange of information and opinion among individuals, groups, and institutions; often involved multiple messages about the nature of risk or expressing concerns, opinions, or reactions to risk messages or to legal and institutional arrangements for risk management.

- HHS, Substance Abuse and Mental Health Services Administration



**Pan American
Health
Organization**

Objectives

- Goal is ... to communicate with the public in ways that build, maintain or restore trust. This is true across cultures, political systems and levels of country development.
- “It is now time to acknowledge that communication expertise has become as essential to outbreak control as epidemiological training and laboratory analysis.”

- WHO



**Pan American
Health
Organization**

From Tsunami to Pandemic

- Crisis and Outbreak Communication skills required:
 - In preparation for an outbreak, natural disaster, other disasters
 - During an outbreak and natural disaster



**Pan American
Health
Organization**

Evolution of Risk Communication

- Decide and Declare
- Decide and Declare with Evidence
- A conversation with the public



Part 1

- Peter Sandman model of risk communication
- Six areas of crisis communication



**Pan American
Health
Organization**

Sandman Model of 4 Kinds of Risk Communication

Peter Sandman

- Public Relations: High Hazard, Low Outrage
- Stakeholder Relations: Moderate Hazard, Moderate Outrage
- Outrage Management: Low Hazard, High Outrage
- Crisis Communication: High Hazard, High Outrage



**Pan American
Health
Organization**

1. High Hazard, Low Outrage

Public relations/ health education

- Audience: apathetic, aren't interested, getting their attention is quite difficult
- Task: messages that reinforce appeals to move the audience towards your goals, provoke more outrage – action
- Medium: monologue via the mass media
- Barriers: audience inattention, size, media resistance



**Pan American
Health
Organization**

2. Moderate Hazard, Moderate Outrage

Stakeholder relations

- Audience: stakeholders – interested and attentive audience, neither too apathetic or too upset to listen
- Task: to discuss, explain, respond to the audience/ stakeholder
- Medium: dialogue, supplemented by specialized media
- Barriers: inefficiency of one on one dialogue



3. Low Hazard, High Outrage

Outrage management

- Audience: ‘outraged – anger , largely at you, ‘fanatics’, (justified or not) you have their attention
- Task: to reduce audience outrage – listening, acknowledging, apologizing, sharing control and credit
- Medium: in person dialogue, audience does most of the talking
- Barriers: outrage



4. High Hazard, High Outrage

Crisis Communication – in a crisis there is no ‘PUBLIC’
everyone is a stakeholder

- Audience: very upset, outraged – more fear and misery than anger
- Task: to help the audience bear its fear and misery
- Medium: monologue via the mass media, dialogue – one on one where possible
- Barriers: stress of the crisis, missing the difference between crisis communication and routine PR



CRISIS COMMUNICATION

- Is the kind of risk communication done when both ‘outrage’ and ‘hazard’ are high
- To help people bear their feelings (outrage) and cope effectively with hazards

Focuses on six areas:

1. Information Content
2. Logistics/ Media
3. Audience Assessment
4. Audience involvement
5. Meta-messaging
6. Self Assessment



Six areas of Crisis Communication

Peter Sandman

1. Information content: What do we know about the crisis. What do we want people to know, and how do we communicate effectively?
2. Logistics/ Media: How do we actually get our contents into the hands (and minds) of our audiences?
3. Audience Assessment: Who do we need to reach, what do they think already, and how should this affect what we say?



**Pan American
Health
Organization**

Six Areas of Crisis Communication (continued)

4. Audience involvement: How do we make our communications meaningfully two-way, and how do we keep our audiences active rather than passive?
5. Metamessaging: How reassuring to be, how confident to sound, how to address emotion?
6. Self Assessment: How will our own values, emotions and political problems affect our crisis communication? What are we likely to get wrong? What are the internal sources of resistance to **getting it right and how can we counter them?**



Part 2

- WHO Outbreak Communication Guidelines



**Pan American
Health
Organization**

WHO Outbreak Communication Guidelines

- Trust
- Announce early
- Transparency
- Involve the public
- Planning



**Pan American
Health
Organization**

Components of Trust

The public perception of:

Motives:

Are responders acting to protect my health and the health of my family?

Honesty:

Are the responders holding back information?

Competence:

Are the responders capable of controlling the outbreak?

Trust must come before the crisis

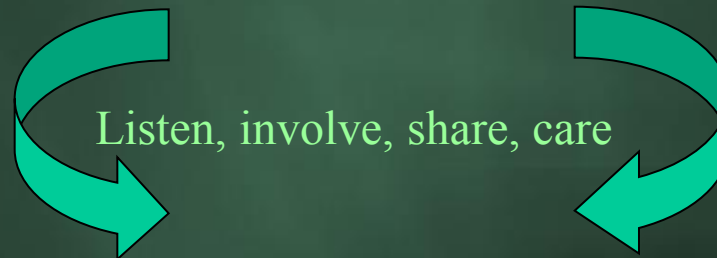


**Pan American
Health
Organization**

Triangle of Trust

- Communicators
- Technical staff
- Policy makers

Loss of trust can be severe



**Pan American
Health
Organization**

First Announcement

NEW YORK'S HOMETOWN NEWSPAPER

Tuesday, October 30, 2001

EARLY TESTS ARE POSITIVE

INHALED ANTHRAX FEARED IN CITY

Hospital worker, 61,
fighting for life - PAGES 2-3

Secrets and lies in Europe

Mad cow disease is perceived as a British problem. But there are signs that the infection has spread silently across the Continent and may now be about to erupt

Debora MacKenzie, Brussels

BEFORE 1996, supermarkets in Brussels that sold British beef would proudly advertise the fact on large signs over their meat counters. Since the scare over mad cow disease put an end to British beef exports, the signs have promoted Belgian beef as a safe alternative—pure and trustworthy, and free from bovine spongiform encephalopathy.

But there is growing evidence that shoppers in Brussels, and all over Europe, are

1989, virtually all caused by infected British feed. Belgium, Austria, Luxembourg, Sweden, Finland and Spain have reported none. Denmark says it has had one case, Italy two and Germany five, though all in cattle imported from Britain. This contrasts oddly with France's 27 cases, all of which were indigenous and all of which were linked to infected British MBM. The Dutch reported their first two cases this spring, apparently also caused by infected British feed.

Britain, says Marc Savey, head of animal health research at the French National Centre for Veterinary Studies in Lyon. A French parliamentary inquiry into BSE published in January claims that up to 16 000 tonnes of British MBM were imported every year by France alone before Paris banned it in 1989. Other EU countries imported British MBM until 1994. Accurate trade figures are impossible to obtain, says Savey, "but we know there is a massive trade in MBM among all European countries. Just the fact that Switzerland has lots of cases caused by British MBM shows there must be others." Yet France, and now the Netherlands, are the only countries reporting such cases.

Savey says that many EU countries, with



Pan American
Health
Organization

First Announcement (Cont.)

- The most critical of all outbreak communication messages
- Must be early
- Likely to be wrong



Transparency

- Barriers to Transparency:
 - Real or perceived competing interest (economic vs. public health)
 - Spokespersons uncomfortable with delivering bad news
 - Fear the media will misrepresent bad or uncertain news
 - Concern the public can't tolerate uncertainty or will “panic”
 - Official belief that if you say nothing, nothing will happen



Transparency (Cont.)

- **Ways to improve transparency**
 - Aim for total candor
 - Don't over-reassure
 - Keep detailed records of decision-making meetings
 - Promise and deliver regular briefings



Guidelines For Action Involving the Public

- Tell people what to expect
- Offer people things to do
- Let people choose their own actions
- Ask more of people



**Pan American
Health
Organization**

Guiding Principles

- Empathy
- Action
- Respect



**Pan American
Health
Organization**

Guidelines For Action

How Bad Is It? How Sure Are You?

- Put reassuring information in subordinate clauses
- Err on the alarming side
- Acknowledge uncertainty
- Share dilemmas
- Acknowledge opinion diversity
- Be willing to speculate



Guidelines For Action (Cont.)

Coping with the Emotional Side of the Crisis

- Don't over diagnose or over plan for panic
- Don't aim for zero fear
- Don't forget emotions other than fear
- Don't ridicule the public's emotions
- Legitimize people's fears
- Tolerate early over-reactions
- Establish your own humanity



Guidelines For Action (Cont.)

Errors, Misimpressions, and Half Truths

- Acknowledge errors, deficiencies and misbehaviors
- Explain changes in official opinion, prediction or policy
- Don't lie and don't tell half truths
- Aim for total candor and transparency
- Be careful with risk comparisons



Planning

Strategies, action plans

Need endorsement of senior management and political leaders on:

- First announcements
- Limits of transparency
- Who will be the spokesperson
- Training, messages, publics, channels of communication
- Communication must be part of senior management group



**Pan American
Health
Organization**

Planning (Cont.)

- “Risk communication should be incorporated into preparedness planning for major events and in all aspects of an outbreak response.”

- World Health Organization



**Pan American
Health
Organization**

Part 3

- Pandemic preparedness
- Communication strategies



**Pan American
Health
Organization**

Case Study: Pandemic Influenza

- Not if, but when
- Crisis and outbreak communication training
- Communication plans
 - Who speaks to whom? When? How?
 - Communication incorporated into technical teams



Communication: A Major Pillar for Pandemic Influenza Preparedness

- Pandemic influenza presents a massive communications challenge....Uncertainty of the course of a pandemic and unknown scientific factors, as well as unforeseen and unintended outcome with respect to governmental actions and statements make this a communications management issue of epic proportions. **U.S.**
- Effective communications provide the backbone for an effective and coordinated response. **UK**
- Accurate and timely information, before and during a pandemic, will be a key factor in successfully managing a pandemic influenza outbreak. **Canada**



Effective Communication: Prepandemic

- Plan now
- Create a Communication strategy
 - Objective: To ensure that mechanisms exist for communicating among agencies, to the media, the public and to essential partners, focusing on prevention and preparation



Prepandemic (Cont.)

- Form risk cross-cutting communications teams
- Produce materials to inform and educate
 - Q & As, Fact sheets, Radio spots
- Create media lists
- Work with partners, community groups
- Create a Pandemic Influenza Plan
 - Who will communicate with whom, when and how?
 - What about drugs? Surge capacity?



Prepandemic (Cont.)

- Assign responsibilities to all team members
- Create prevention messages
 - For small producers
 - How to avoid the global threat
 - For the public sector to the public
- Risk comm training for health and agriculture sectors
- Research what the public perceives and believes



Communication Surveillance

- Is the public worried and in need or reassurance?
- Is the public too calm and in need of warning?
- Are they angry and in need of calming?
- Crisis + heightened public emotions + limited access to facts + rumor, gossip, speculation, assumption, and inference = an unstable information environment, panic, bad decisions, danger, credibility



Messages

- Clear
- Concise
- Consistent



**Pan American
Health
Organization**

Examples of Messages

- An epidemic seems likely, we need to prepare and strengthen basic public health infrastructure
- Good hygiene is important, cover your mouth when you cough, wash your hands
- The sooner we start preparing the better....



When a Pandemic Starts

What the public wants to know

- Am I (are we) safe?
- What have you found that will affect me (my family)?
- Who (what) caused this?
- Can you fix it? If not, who or what can?
- How can I protect myself (family) in the future?



**Pan American
Health
Organization**

Inform the Public Early

- People are entitled to information that affects their lives.
- If you wait, the story may leak anyway. When it does, you are apt to lose trust and credibility.
- You can better control the accuracy of and the frame for information if you are the first to present it.
- There is more likely to be time for meaningful public involvement in decision-making if the information is released promptly.
- Prompt release of information about one situation may prevent similar situations elsewhere.
- Less work is required to release information early than to respond to inquiries, attacks, etc. that might result from delayed release.
- You are more apt to earn public trust if you release information promptly.
- If you wait, people may feel angry and resentful.
- People are more likely to overestimate the risk if you withhold information.



Communicate risks to authorities, health professionals and general public (Phase: Emergence Of A Pandemic Virus)

- Use communication channels that reach communities and allow them to access and share information.
- Create and distribute accurate messages on avian influenza risks for citizens.
- Identify and train credible spokespersons to deal with the media.
- Monitor and evaluate message delivery and acceptance to adequate messages.



Communicate risks to authorities, health professionals and general public.

(Phase: Emergence Of A Pandemic Virus)

- Activate intersectoral team with experts in risk communication, educators, epidemiologists, researchers, press officers, and personnel from health and agriculture sectors.
- Identify specific needs for information in various groups and communities.
- Collaborate and integrate information activities with other agencies and groups to ensure credibility and continuity of messages.



Risk communication strategies implemented and effective.

(Phase: Pandemic Declared And Spreading Internationally)

- Establish a variety of communication channels for the public and for specific target groups, using internet, media access, television, and radio to disseminate trustworthy information.
- Elaborate specific recommendations for designated pandemic spokesperson in the countries
- Distribute accurate messages on pandemic influenza to target groups.
- Distribute information on personal respiratory hygiene and transmission risk reduction in the community.



Risk communication strategies implemented and effective

- Establish schedule for interviews, presentations, and other vehicles to keep a constant flow of information about influenza going to target publics.
- Use intersectoral team of experts in risk communication, educators, epidemiologists, researchers, press officers, and personnel from health and agriculture sectors to design, update, and disseminate accurate information.
- Continue to collaborate and integrate information activities with other agencies and groups to ensure credibility and continuity of messages.
- Review and update pandemic influenza published information materials.



Part 4

- Presenting to the public
- Working with the media



**Pan American
Health
Organization**

Presenting Information to the Public

- Public or virtual meetings
- Anticipate interests, concerns and questions
- Prepare your presentation with
 - A strong introduction
 - Max of three key messages
 - Assemble supporting data
 - Prepare visual aids
 - A summarizing conclusion
 - Practice



Communicating with the Public

- To ease public concern
 - If the risk is low, say so
 - The illness is treatable ...
 - It is easily contracted ... and you should ...
 - Symptoms are easily recognized ...



Communicating with the Public

- Give guidance on how to respond
 - Take these precautions
 - Cover your cough
 - If exposed, contact.....
 - If you have the following symptoms, get in touch with ...
 - See if there are possible symptoms in those around you



"There is no need to panic" implies :

1. "The officials think or know that people are close to panicking. Things must be pretty bad." This increases public alarm.
2. "The officials think we're about to panic. How insulting." This decreases respect for officials.
3. "The officials are close to panicking themselves." This increases public alarm.



Presenting Information

- Statement of concern (empathy)
 - I see by the number of people here that you... I...
- Organizational intent
 - I am committed to We of xx are....
- Purpose of meeting
 - We would like to share with you the findings of ...
- Preparing key messages
 - Identify the max 3 important issues
- Conclusion
 - Restate key messages
 - What will be done, short term, longer



Suggestions

- Use language that can be understood, ie: avoid jargon
- Use positive or neutral terms
- Remain calm, communicate positively
- Ask whether you have been understood
- Be aware of nonverbal body language
- Promise only what you can deliver
- Assume everything you say is “on the record”



Personal Presentation Guidelines

- Intensity of your voice reflects confidence, watch audience
- Speak distinctly and correctly
- Vary your tempo, speak to emphasize points, avoid OKs, uhs, like
- Maintain eye contact
- Vary your tempo
- Watch gestures – can detract
- Dress appropriately, which varies
- Avoid distractions, such as throat clearing, looking at watch



Responding to Questions

- Emphasize your key messages
- Keep responses short and to the point
- Listen, respond with confidence
- Tell the truth, and if you don't know, say so



Accurate and Timely

- Tension between the two
 - Waiting for complete information = rumors, speculation
 - Releasing quickly can risk misleading, undermine
- Establish regular media briefings at a convenient time
- Provide statistics in context
- Explain how information was gathered



Managing Hostile Situations

- Acknowledge it, don't ignore
- Send the message that you are in control
- Watch your own anxiety levels, which undercut confidence
- Practice your presentation
- Listen to the frustrations, communicate with care, empathy
- Use eye contact
- Turn negatives into positives and bridge back to messages



Myths

- Risk communication is more likely to alarm than calm
 - Truth: Educate and inform. Let people express their concerns, ask questions, receive responses.
- Many issues during crisis are too difficult for the public
 - Truth: Part of your job is to help the public understand, no matter how complex
- Risk communication is not my job
 - Truth: If working in public sector you have the responsibility to the public.
- If we listen to the public we may divert limited resources...
 - Listening does not mean setting the agenda



Working with the Media

- They will inform and explain
- What you say is important, so is how you say it
- Reporters neither friends nor enemy, expect only fairness and courtesy
- Never let professional disagreements turn into personal fights
- Don't hold grudges
- Refer to media training notes



Media as Partners with Pandemic Influenza

- Get the word out on initiatives and progress
- Help fulfill the mission
- Challenge and opportunity



**Pan American
Health
Organization**

Some Basics

- Never lie to the media
- Bring them in early, while you are preparing
- If you don't know, say so, but add you will find out
- Help reporters understand the situation
- Questions are predictable – prepare
- If you say you will call back, do so
- The media are a channel to your primary publics



Do – during an interview

- Be honest and accurate
- Deliver and redeliver your key message
- State conclusions followed by supporting data
- Acknowledge what you don't know
- Offer to get more information
- Stress the facts
- Give reasons for not discussing a subject
- Correct mistakes by saying you'd like to clarify
- Assume that microphones are always on



Bridging

- Verbal maneuver to reformulate question in terms most favorable to you
- Lead in Phrases:
 - “That’s one perspective...”
 - “What concerns me even more..”
 - Yes, but ...
 - True, however ...
 - Here’s an even more important point ...
 - Another way to see it is ...
 - What concerns me even more ...



Stay on Message, Yet....

- I understand your concern, we must.....
- The risk to the public is high ...
- As I said earlier, the risk to the public is high ...
- That's an important issue, but I want to stress the risk to the ...
- Before I close I want to remind you that the risk
- As mentioned, you should ...



Correcting Errors and Rumor Control

- Respond quickly to reporter, network, paper, etc.
- Don't overreact
- If major, call a news conference, issue a statement
- Quell rumors publicly, ex: There are no plans to evacuate....
- Give complete answers so that rumors are not created (because there is no evacuation plan...)



Pandemic Communication Challenges

- Doing things that are counterintuitive (IDK/YNS)
- Adjustment reaction
- Trusting the public
- Working to avoid stigma
- Creating messages with the public (reaching vulnerable)



Thanks

- Let me know how we can help
- brennanb@paho.org



**Pan American
Health
Organization**