

# World Health Organization Outbreak Communication Planning Guide

2008 Edition



World Health  
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# USING this GUIDE

## Objective

The objective of this document is to help national authorities apply the *WHO Outbreak Communication Principles* to their outbreak planning and preparation activities. This document addresses specific public health objectives including:

- ensuring at-risk populations have the information they need to make well-informed decisions and to take appropriate actions to protect their health and safety during an outbreak;
- supporting coordination and the efficient use of communication resources among local, national and international public health partners;
- providing relevant public health information to inform implicated non-health sectors;
- minimizing social and economic disruption;
- and, as an overarching goal before, during and after outbreaks, to maintain and build public trust in public health authorities.

## Intended User

National public health authorities are the intended users of this document.

## Scope

The recommendations contained in this document build from the WHO Outbreak Communication Guidelines and, therefore, focus on infectious disease outbreaks. By following the recommendations set out in the document, however, an organization will be building public communication capacity that will be useful in responding to public health emergencies in general.

## Tools and Checklists: related WHO documents

Among the most practical outbreak communication planning and response steps is the integration of simple tools and checklists for specific public communication activities. While not the focus of this document, several WHO resources are available which provide tools and checklists as well as in-depth consideration of specific public communications roles and areas of specialization.

For additional information on media relations in the outbreak context please see:

**Effective Media Communications during Public Health Emergencies: A WHO Handbook:**  
[http://www.who.int/csr/resources/publications/WHO\\_CDS\\_2005\\_31/en/](http://www.who.int/csr/resources/publications/WHO_CDS_2005_31/en/)

For additional information on public health social mobilization please see:

**Planning Communications-for-Behavioural-Impact (COMBI) Programmes for Health, WHO Mediterranean Centre, Tunisia:**  
<http://wmc.who.int/images/stories/pdf/combimanualVerCD.pdf>

For additional information on pandemic influenza communication please see:

**WHO Pandemic Influenza Preparedness & Response Guidance:**  
<http://www.who.int/csr/disease/influenza/pandemic/en/>

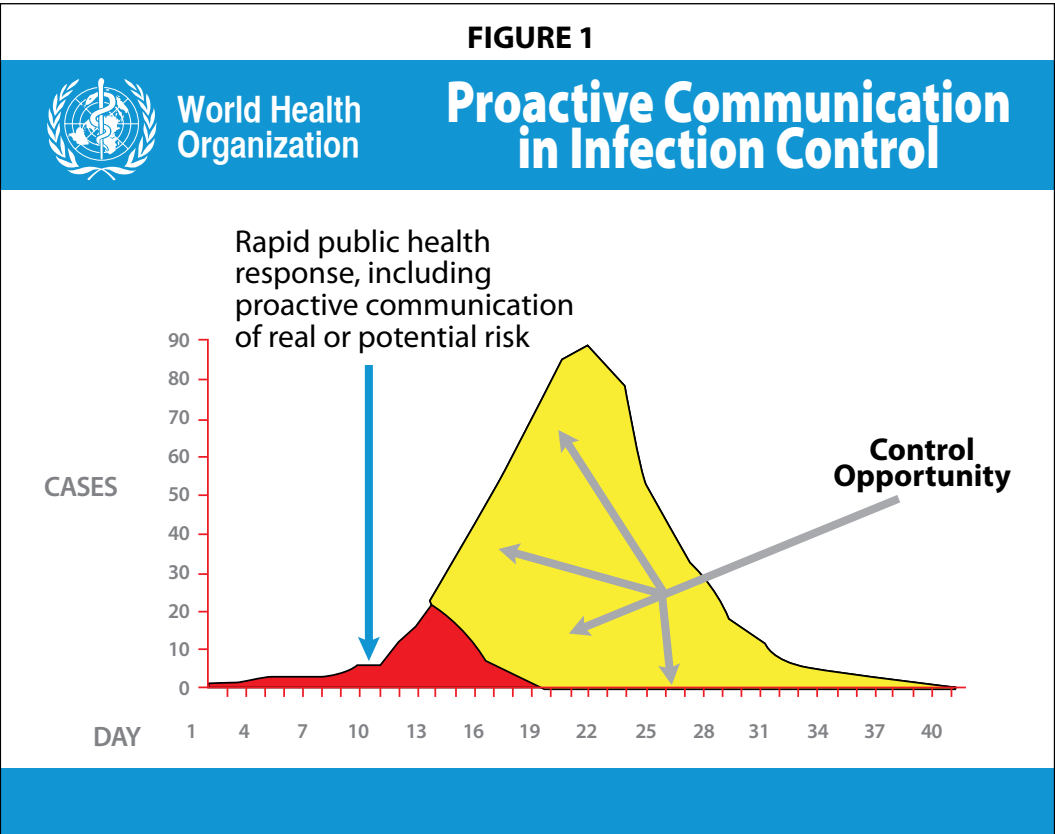
# Introduction

Effective risk communication is an essential element of outbreak management. When the public is at risk of a real or potential health threat, treatment options may be limited, direct interventions may take time to organize and resources may be few. Communicating advice and guidance, therefore, often stands as the most important public health tool in managing a risk.

Pro-active communication encourages the public to adopt protective behaviors, facilitates heightened disease surveillance, reduces confusion and allows for a better use of resources - all of which are necessary for an effective response.

Figure 1 illustrates a typical epidemic curve – which tracks numbers of cases over time – that could form during an infectious disease outbreak. The yellow area represents the number of cases which could be avoided – the control opportunity – of a rapid response to the threat.

The blue arrow indicates the point at which proactive communication plays a crucial role in supporting such a rapid response. By alerting a population and partners to an infectious disease risk, surveillance of potential cases increases, protective behaviors are adopted, confusion is limited and communication resources are more likely to be focused. Effective communication can help limit the spread of a disease and ultimately save lives.



Source: adapted from figure 2, page XII, World Health Report 2007

# The Planning Foundation:

## WHO Outbreak Communication Guidelines

In early 2004, WHO began to construct evidence-based, field-tested communication guidance that would promote the public health goal of rapid outbreak control with the least possible disruption to society. The WHO Outbreak Communication Principles can be summarized as follows:

### 1. Trust

The key principle of outbreak communication is to communicate in ways that build, maintain or restore trust between the public and outbreak managers. Without this trust, the public will not believe, or act on, the health information that is communicated by health authorities during an outbreak.

### 2. Announcing early

Proactive communication of a real or potential health risk is crucial in alerting those affected and minimizing an infectious disease threat. Announcing early - even with incomplete information - prevents rumors and misinformation. The longer officials withhold information, the more frightening the information will seem when it is eventually revealed, especially if it is revealed by an outside source. Late announcement will erode trust in the ability of public health authorities to manage the outbreak.

### 3. Transparency

Maintaining the public's trust throughout an outbreak requires ongoing transparency, including timely and complete information of a real or potential risk and its management. As new developments occur over the course of an outbreak they should be communicated proactively. Transparency should characterize the relationship between the outbreak managers, the public and partners as it promotes improved information gathering, risk assessment and decision-making processes associated with outbreak control.

### 4. Listening

Understanding the public's risk perceptions, views and concerns is critical to effective communication and the broader emergency management function it supports. Without knowing how people understand and perceive a given risk and what their existing beliefs and practices are, decisions and required behavior changes necessary to protect health may not occur and societal or economic disruption may be more severe.

### 5. Planning

Public communication during an outbreak represents an enormous challenge for any public health authority and therefore demands sound planning, in advance, to adhere to the principles described above. Planning is an important principle, but more importantly, it must translate into action.

For additional information on the original WHO Outbreak Communication Principles please see: **Outbreak Communication: Best practices for communicating with the public during an outbreak:** [http://www.who.int/csr/resources/publications/WHO\\_CDS\\_2005\\_32web.pdf](http://www.who.int/csr/resources/publications/WHO_CDS_2005_32web.pdf)



# The Planning Challenge:

## Moving from Concept to Application

Since their introduction, the WHO Outbreak Communication principles have been useful in establishing the broad framework for effective communication during infectious disease outbreaks. More detailed implementation advice has been requested by Member States, however, in order to strengthen the national planning activities of public health organizations.

Focusing on the outbreak communication principle of *planning*, this document attempts to respond to these requests and is a guide to help Member States to build the required capacity for effective outbreak communication.

Member States may not have the human and financial resources to put in place elaborate public communication systems. The approach set out in this document, however, urges authorities to build from existing systems and take advantage of the capacity of other partner organizations. Basic planning is within the capacity of all, and the guidelines and recommendations offered here should be considered flexible and scalable, allowing public health communication managers to implement them according to their particular circumstances.

This document sets out seven planning steps recommended for national public health authorities to create a comprehensive plan for implementing the WHO Outbreak Communication Guidelines. It should be underscored, however, that a developed plan does not equal preparedness. Successful outbreak communication capacity is an ongoing and dynamic process including exercises, review, modifications and updates to ensure effectiveness.

### Risk Communication: the International Health Regulation Context

The revised International Health Regulations (IHR 2005) came into force in June 2007 and represent a binding agreement among 194 State Parties to prevent, protect against, control and respond to public health events of international concern.

In addition, national core capacity requirements for surveillance and response among all State Parties are set out in the Regulations. Risk communication has been identified as one of the required core capacities within national public health authorities.

Although the IHR 2005 is concerned with public health events of international concern and not only infectious disease threats, the recommendations set out in the WHO Outbreak Communications Planning Guide have broad-based benefits for the ability of public health authorities to effectively communicate in crisis. The Planning Guide's recommendations are consistent with the IHR's broader risk communication capacity building requirements.



# WHO Outbreak Communication

## Planning Steps

The following planning steps for national public health authorities represent the key broad areas of work in building the required public communications capacity to deal with infectious disease risks. Each step is explored in detail in the sections which follow.



### Step 1: Assessment

Conduct an assessment of existing public communication capacity and existing research of community understanding, including demographics, literacy levels, language spoken as well as socio-economic and cultural backgrounds

### Step 2: Coordination

Identify likely public communication partners and develop a communication coordination mechanism

### Step 3: Transparency

Put in place a national level policy or guideline on the public announcement and ongoing release of information in the event of a verified or suspected infectious disease risk

### Step 4: Listening during outbreaks

Develop a system for ongoing information gathering during an outbreak about public knowledge, attitudes and behaviors related to infectious disease risks, interventions and involved organizations

### Step 5: Communication Evaluation

Ensure there is an evaluation mechanism to identify public communication strengths and weaknesses during and following infectious disease events

### Step 6: Constructing an Emergency Communication Plan

Capturing the previous steps, develop a written outbreak or emergency communication plan

### Step 7: Training

Ensure readiness by establishing a risk communications training program, including simulations and exercises to test the emergency public communication plan and its components

## ■ Planning Step 1: Assessment

### Key Planning Actions:

- Review existing plans
- Identify existing public communication capacity and expertise

The groundwork for outbreak communication planning should begin with the following capacity assessment steps.

- a. Review any existing outbreak or emergency plans within the organization and the communication roles and responsibilities they may contain. Identify existing communication capacity among organizations inside and outside government (e.g. other government departments, professional associations, non-governmental and private sector partners). With particular focus on:
  - Language and translation capacity
  - Existing information sharing networks
  - Ability to communicate with hard to reach populations
- b. Assess capacity of existing listening and public opinion gathering mechanisms such as media monitoring systems, community advisory groups, public inquiry phone-in lines, or web based systems within the organization and among partner organizations (note: compiling any existing community profiles of cultural, language or socio-economic data can inform communication during the first stages of an emergency, before full assessments can take place)
- c. Review any international agreements, national laws or organizational policies on the public release of information

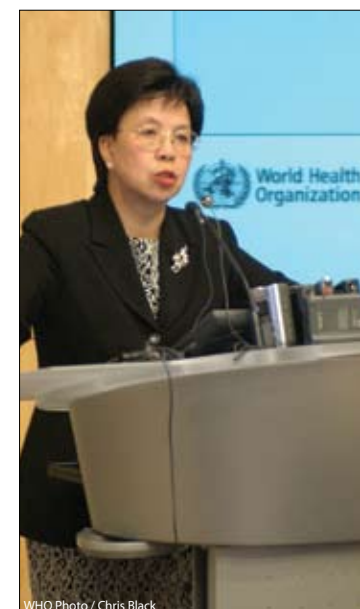


WHO Photo / J. Perugia

## ■ Planning Step 2: Coordination

### Key Planning Actions:

- Identify likely communication partners
- Establish a communication coordination mechanism



WHO Photo / Chris Black

Public health is a shared responsibility and depends on strong partnership among local, regional, national and international authorities. This is true among all public health functions including that of communication.

Distinct structures, leadership and perspectives ensure that such public communication coordination can be challenging. This is especially so during outbreaks as involved partners quickly broaden into non-health sectors, and the human health risk is elevated.

Although potentially difficult, strong partner coordination offers the chance for public health authorities to utilize the communications capacity and credibility of other organizations to disseminate public health advice, to better understand the situation, and ultimately, help limit an outbreak's spread. Failure to coordinate, on the other hand, increases the possibility that communication resources will be wasted, fails to take advantage of partner's distinct dissemination channels, and increases the likelihood of confusing and even contradictory public information.

### Coordination in Practice: Ugandan Epidemic Response

Ugandan public health officials place a high priority on coordination and have developed a structured system known as the National Task Force to help manage serious public health threats.

Chaired by a senior official of the Ministry of Health various Ministries are represented as required, depending on the nature of the problem, such as the Ministry of Agriculture. Membership of the National Task Force, however, is not confined to Ugandan Government staff. Various domestic and international partners are also involved including the World Health Organization, Red Cross, UNICEF and even independent experts.

Communication, including social mobilization, media and psycho-social support, is a dedicated sub-committee feeding into decision making and daily situation reports on the outbreak.

Setting out a flexible coordination structure in advance can help in the challenge of outbreak communication coordination and should be seen as a useful planning step.

Coordination: A Priority Planning Activity

Together with the broader assessment activities, it is recommended that planning the coordination of communication among partners be among the first steps taken to build outbreak communication capacity. Preparatory work to ensure strong communication coordination for outbreak events has several steps.

A. Partner Identification

The specific partners involved in a given outbreak will vary based on the country, region and the nature of the problem. Each national authority has to develop its own outbreak communication partner list.

The core question informing the compilation of such a list is:

- In the event of an infectious disease outbreak, what other organizations are likely to be engaged in public communication activities?

This can then be broken down into some of the general categories of potential partners:

Public Health Organizations

- Regional or local health authorities including hospitals and clinics
- Medical professional associations and health sector unions
- Health sector non-governmental organizations
- Health sector international organizations including the WHO, UNICEF, Médecins Sans Frontières, International Federation of Red Cross and Red Crescent Societies

Non Public Health Organizations

- Other government ministries or agencies such as those responsible for agriculture, trade, tourism, and foreign affairs
- Religious groups
- Business and industry associations
- Local political parties and activists
- Academic and other external experts

B. Communication Coordination Mechanisms

Options to coordinate between the various partners can range from simple email updates and

- Together with identified partners, sketch out public information sharing protocol in the event of an outbreak using email, text message or telephones. The aim of the protocol should be to ensure that partners can be informed of what individual organizations are saying publicly through media releases/interviews, public service announcements and telephone “hotlines” and other published material.

Additional coordination options that may need to be considered:

- Face to face and teleconference meetings may be appropriate based on the nature of the coordination challenge, and the organizations involved.
- Web-based collaboration systems may be useful as a means of exchanging information, materials and providing input into products.

Whatever the coordination structures and systems chosen, their effectiveness will be determined through their effective use and function. Figure 2 outlines key collaboration principles which support cooperation.



Figure 2: Outbreak Communication Collaboration Principles

- Develop partnerships in advance of a problem – founded on the common purpose of serving the community
- Build trust with partners by demonstrating transparency in communication with them, especially in providing details on how public health decisions were made
- Whenever possible, involve partners from within the affected community – in addition to being highly credible and effective voices, they represent points of view that are vital to understanding the perceptions of various groups affected
- Be prepared to explain organizational systems and processes to partners who may not have had exposure to public health emergencies in the past
- Be prepared to interact with organizations not necessarily completely supportive of the authorities or government
- Coordination plans should be flexible and adaptable – partners may vary according to the specific nature of the problem
- Don't expect partnership to mean everyone communicates exactly the same thing. The key is to ensure public health messages are not contradictory and confusing
- Be aware that, midway through the event, it may become clear that specific communities are not being reached and new partners will need to be engaged in order to prevent the spread of disease.

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