Risk Communication and Community Engagement on for Health Emergencies: Practical Aspects

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A communication model

"During epidemics and pandemics, humanitarian crises and disasters, effective risk communication enables those most at risk to understand and adopt preventive behaviors. It enables authorities and experts to listen to and address people's concerns and needs, so that the information they provide is relevant, reliable and acceptable."

Communicating risk in public health emergencies - OMS
What is RCCE?

“Reciprocal and multidirectional communication with affected populations so that they can make informed decisions to protect themselves and their loved ones”, WHO.

It promotes community engagement to establish prevention and self-protection measures, which generates greater confidence and considerably contributes to slowing down diseases expansion and to preventing them.

It is important to remember: RCCE is one of the 15 Basic IHR capacities.
Risk Communication

Risk communication aims at enabling all people at risk to make decisions so as to mitigate the effects of threats, such as a disease outbreak or other public health event, and so as to take preventive and protective measures.
From theory to practice...

What is a risk communication system?

It is a structure that enables capacities in risk communication and community engagement for the preparedness and response stages in any health emergency.

The system must have the following characteristics:
• Nationally led
• Community Focused
• Collaborative and inclusive
• Integrated into the overall preparedness and response system
• With evidence-based data
• Auditable
The RCCE system is operationalized through a plan or strategy that...

1. Facilitates and directs decision-making about communication in an emergency context.
2. Structures communication with the public and manages the infodemic.
3. Engage the community and strengthen communities.
4. Cyclically monitor and evaluate to adapt and contribute to the preparedness cycle for the next emergency.

The ultimate goal is to strengthen and maintain community trust.
Risk communication cycle

- Making up the risk communication team
- Internal coordination
- Inter-institutional coordination
- Links with partners and allies
- Risk communication plan
- Internal and external training
- Preparing messages
- Definition of channels and dissemination formats for preparation, response and recovery
- Communication surveillance
- Media plan
- Resource management
- Plan evaluation
- Documenting lessons learned
- Identifying actions to improve the plan
Communication and Crisis Management during public health emergencies in 4 phases

**Preparedness**
- Determine internal coordination mechanisms and/or protocols for risk communication management
- Create risk communication plans/strategies that include a message guide for the most common threats in the country. Test and adapt plans and strategies. Include a guide to key messages for emergencies in the national strategy or plan.

**Emergency start**
- Express empathy
- Explain the risks
- Promote preventive actions/behaviors
- Describe response efforts

**Control**
- Explain ongoing risks
- Target audiences
- Provide basic information
- Address / channel rumors: managing the infodemic.

**Recovery**
- Encourage surveillance
- Discuss lessons learned
- Review and adapt the plan.
Phase 1/Preparedness: Internal Management

- Definition of contingency actions
- Definition of communication flows and coordination mechanisms between health sector and other relevant sector entities.
- Operational plans and protocols
- Key players
- Design of the risk communication plan/strategy and testing activities thereof.
Phase 2/ Emergency start

Examples of activities in the following phases during the COVID-19 pandemic.
Important aspects for external management

1. Map community behaviors and perceptions.
2. Social Listening: Monitor narratives and what the community is talking about and respond (Infodemic Management).
3. Tailor (emergency) response and communication to findings of risk behavior.
4. Define feedback mechanisms to improve the response to an emergency.
5. Work jointly with epidemiological surveillance teams, rapid response teams, community health workers, community leaders, schools and teachers, local merchants, etc.
External Management

6. Involve other sectors: businessmen, hoteliers, NGOs, religious leaders, schools, etc.
7. Map supporters in the departments, (communes) for economic and social support, if necessary.
Phase 3/Crisis control
External management

Agents collecting an ovitrap in Brazil, to fight endemic diseases
Phase 4/Recovery

• How to return to face-to-face work
• How to return to social life
• How to finalize public health measures that support prevention of respiratory virus diseases
Phase 4/Recovery

• How to return to face-to-face work
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GRACIAS!
THANKS!
OBRIGADA!