

Effective Media Communication during Public Health Emergencies

A WHO FIELD GUIDE



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Organization**

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PREFACE

We have had great success in the [last] five years in controlling outbreaks, but we have only recently come to understand that communications are as critical to outbreak control as laboratory analyses or epidemiology.

Dr Jong-wook Lee, Director-General, WHO, 21 September 2004

Until the outbreak of an exotic communicable disease or other dramatic event, the elaborate infrastructures and mechanisms that protect public health on a daily basis often go unnoticed and attract little media interest. In the midst of a public health emergency the situation becomes very different as the demand for information rapidly escalates. Only recently has the true extent to which media communication directly influences the course of events been recognized. Good communication can rally support, calm a nervous public, provide much-needed information, encourage cooperative behaviours and help save lives. Poor communication can fan emotions, disrupt economies and undermine confidence.

Recent outbreaks of severe acute respiratory syndrome (SARS) and avian influenza, releases of anthrax and sarin, and natural disasters such as the South-East Asian tsunami, underline the importance of communication during public health emergencies. Communication challenges are particularly pronounced when fear of a naturally occurring or deliberately released pathogen spreads faster and further than the resulting disease itself. In such situations, policy-makers, the news media and the public all expect timely and accurate information. It is vital that people feel that officials are communicating openly and honestly. The most important asset in any large-scale public health emergency is the public because ultimately they must take care of themselves. Through effective media communication, public health officials can engage the public and help them to make informed and better decisions.

Such effective media communication requires trust and understanding between public health officials and the media. The media depend on public health officials for timely and accurate information. Public health officials depend on the media to get their messages out before, during and after an emergency. They also use the media as a surveillance system. For these reasons, each side depends upon the other to be successful. The media should therefore be viewed both as a crucial means of conveying information and as a component of outbreak surveillance.

Effective media communication is in fact a crucial element in effective emergency management and should assume a central role from the start. It establishes public confidence in the ability of an organization or government to deal with an emergency, and to bring about a satisfactory conclusion. Effective media communication is also integral to the larger process of information exchange aimed at eliciting trust and promoting understanding of the relevant issues or actions. Within the limits of available knowledge, good media communication aids such efforts by:

- building, maintaining or restoring trust;
- improving knowledge and understanding;
- guiding and encouraging appropriate attitudes, decisions, actions and behaviours; and
- encouraging collaboration and cooperation.

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INTRODUCTION

Effectively communicating information during public health emergencies on the threats posed and on the actions needed remains a significant and highly difficult challenge. Such communication not only needs to be carefully planned and implemented but must also be properly integrated with emergency management activities and operations. Emergency events therefore present a unique challenge to the internal media-relations capabilities of health agencies and preparation is vital. It is all too easy to be caught unprepared, especially for short-notice or demanding media interviews. Conversely, well-constructed and properly delivered media messages can inform and calm a worried public, reduce misinformation, and focus attention on what is most important. Communicate badly and one may be perceived as incompetent, uncaring or dishonest. Communicate well and one can reach more people with a clear and credible public health message.

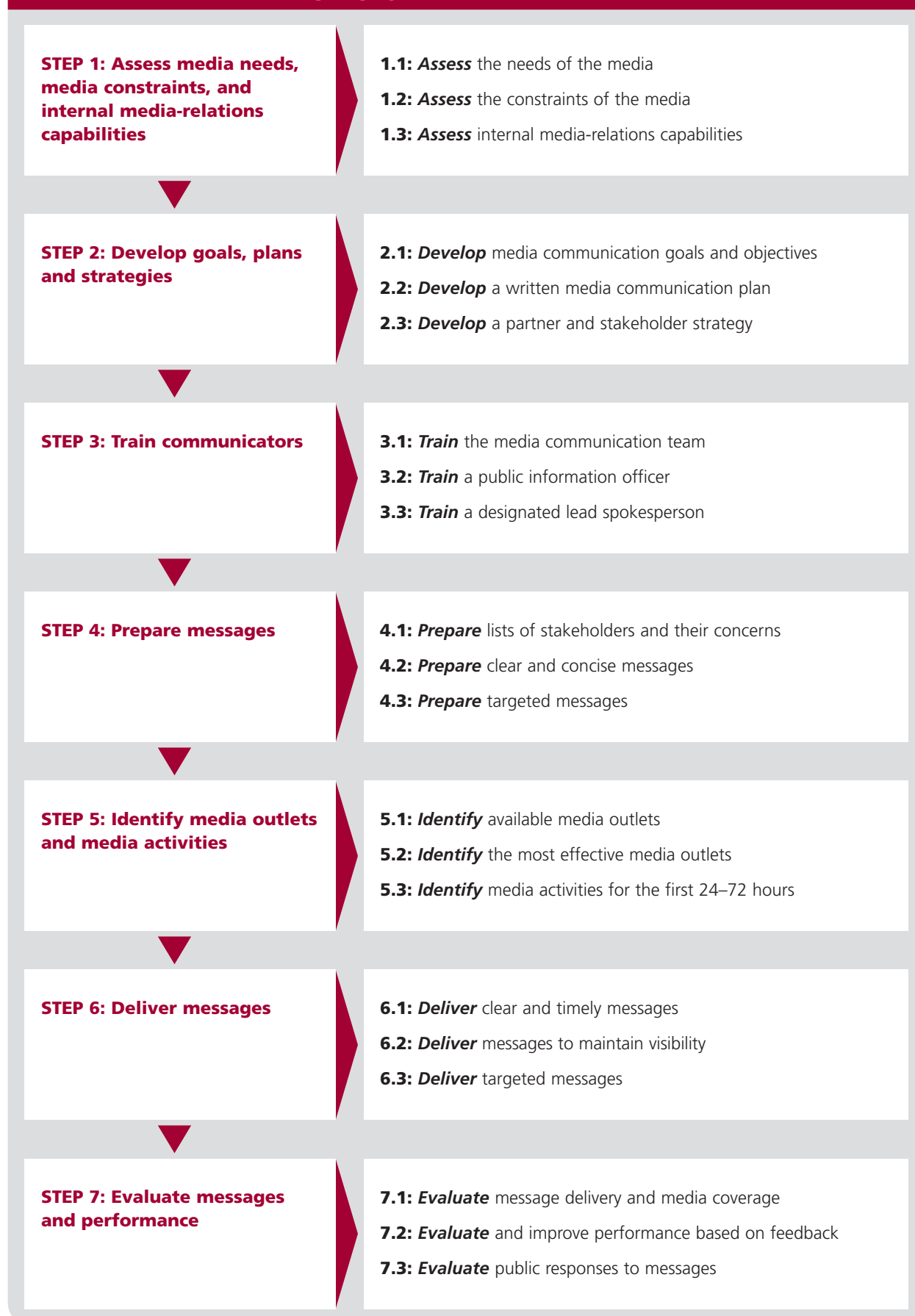
Effective media communication is therefore a key responsibility of public health professionals and information officers, especially during emergencies. This field guide summarizes the practical steps that can be taken to strengthen and enhance efforts made in this area. The guide can act as a rapid primer document as it highlights aspects of media communication activities that are crucial during a public health emergency. The target audiences for this field guide are WHO office and field personnel who are unfamiliar with media interactions or who wish to sharpen their skills in this area. It is also intended to help public health officials in other organizations and networks to deal with the media communication aspects of public health emergencies.

As with the WHO handbook¹ that accompanies this guide, information is presented in accordance with the seven-step process for planning and implementing effective media communication shown in **FIGURE ONE**. Although it covers many issues, this field guide is primarily intended to be a reminder of key points in each of the seven steps. For more in-depth information on any of the steps, the WHO handbook should be consulted.

Even in our widely diverse and culturally rich global community, there are still universal and commonly accepted best practices for communicating effectively through the media. This is supported by a robust scientific evidence base, including the documented consequences of not using best practices. Global best practices and principles should however always be tailored to local needs, and this handbook should be complemented with local and regional media training. Many cultures, for example, rely on folk and traditional means of mass communication which typically originate from the beliefs and customs of a specific population. A guiding principle of effective media communication in a global context is that all communication activities and materials (including those prepared for the media) should reflect the diverse nature of societies in a fair, representative and inclusive manner (see information point).

¹ *Effective Media Communication during Public Health Emergencies: A WHO Handbook*. Hyer RN and Covello VT. Geneva, World Health Organization (WHO/CDS/2005.31) 2005; July.

FIGURE ONE: SEVEN STEPS TO EFFECTIVE MEDIA COMMUNICATION DURING PUBLIC HEALTH EMERGENCIES



INFORMATION POINT: Cross-cultural sensitivity in message design

Given the wide diversity of cultures, media communication should be sensitive to:

- words, images and situations that suggest cultural or ethnic stereotypes;
- negative implications of symbolism and usage that could offend people or reinforce bias;
- language with questionable racial or ethnic connotations;
- different cultural meanings assigned to:
 - symbols
 - signs
 - words;
- different cultural standards for:
 - attentiveness during conversation
 - distance between speakers during a conversation
 - what is considered humorous
 - what topics are considered inappropriate or taboo
 - taking turns during conversations
 - loudness, speed of delivery, length of delivery, silence, attentiveness and time to respond to another's point
 - entering into and exiting from conversations; and
- different meanings of colours and imagery.

These considerations should be adapted to meet local needs

STEP 1

Assess media needs, media constraints, and internal media-relations capabilities

1.1: Assess the needs of the media

The news media can be valuable allies during an emergency. News media include newspapers, magazines, television, radio and the internet. Understanding what the news media want from a story and what they are likely to ask helps to define what will best meet their needs (**BOX 1.1**).

1.2: Assess the constraints of the media

There are a host of organizational, legal and professional constraints that affect the ability of journalists to become informed and to cover a story effectively (**BOX 1.2**). Each of these constraints must be recognized and addressed when developing media communication plans and preparing for media interviews.

1.3: Assess internal media-relations capabilities

Quick response capabilities are crucial to establishing an organization as the primary source of information for the media during an emergency. The assessment tool shown in **BOX 1.3** can be used to assess an organization's internal media-relations capabilities. The tool should be adapted to meet local needs.

BOX 1.1: 77 MOST FREQUENTLY ASKED QUESTIONS BY JOURNALISTS IN AN EMERGENCY

1. What is your name and title?
2. How do you spell and pronounce your name?
3. What are your job responsibilities?
4. Can you tell us what happened? Were you there? How do you know what you are telling us?
5. When did it happen?
6. Where did it happen?
7. Who was harmed?
8. How many people were harmed?
9. Are those that were harmed getting help?
10. How are those who were harmed getting help?
11. Is the situation under control?
12. How certain are you that the situation is under control?
13. Is there any immediate danger?
14. What is being done in response to what happened?
15. Who is in charge?
16. What can we expect next?
17. What are you advising people to do? What can people do to protect themselves and their families – now and in the future – from harm?
18. How long will it be before the situation returns to normal?
19. What help has been requested or offered from others?
20. What responses have you received?
21. Can you be specific about the types of harm that occurred?
22. What are the names, ages and hometowns of those that were harmed?
23. Can we talk to them?
24. How much damage occurred?
25. What other damage may have occurred?
26. How certain are you about the damage?
27. How much damage do you expect?
28. What are you doing now?
29. Who else is involved in the response?
30. Why did this happen?
31. What was the cause?
32. Did you have any forewarning that this might happen?
33. Why wasn't this prevented from happening? Could this have been avoided?
34. How could this have been avoided?
35. What else can go wrong?
36. If you are not sure of the cause, what is your best guess?
37. Who caused this to happen?
38. Who is to blame?
39. Do you think those involved handled the situation well enough? What more could or should those who handled the situation have done?
40. When did your response to this begin?
41. When were you notified that something had happened?
42. Did you and other organizations disclose information promptly? Have you and other organizations been transparent?
43. Who is conducting the investigation? Will the outcome be reported to the public?
44. What are you going to do after the investigation?
45. What have you found out so far?
46. Why was more not done to prevent this from happening?
47. What is your personal opinion?
48. What are you telling your own family?
49. Are all those involved in agreement?
50. Are people over-reacting?
51. Which laws are applicable?
52. Has anyone broken the law?

**77 MOST FREQUENTLY ASKED QUESTIONS BY JOURNALISTS IN AN EMERGENCY
– CONTINUED –**

53. How certain are you about whether laws have been broken?
54. Has anyone made mistakes?
55. How certain are you that mistakes have not been made?
56. Have you told us everything you know?
57. What are you not telling us?
58. What effects will this have on the people involved?
59. What precautionary measures were taken?
60. Do you accept responsibility for what happened?
61. Has this ever happened before?
62. Can this happen elsewhere?
63. What is the worst-case scenario?
64. What lessons were learned?
65. Were those lessons implemented? Are they being implemented now?
66. What can be done now to prevent this from happening again? What steps need to be taken to avoid a similar event?
67. What would you like to say to those who have been harmed and to their families?
68. Is there any continuing danger?
69. Are people out of danger? Are people safe?
70. Will there be inconvenience to employees or to the public? What can people do to help?
71. How much will all this cost?
72. Are you able and willing to pay the costs?
73. Who else will pay the costs?
74. When will we find out more?
75. What steps need to be taken to avoid a similar event? Have these steps already been taken? If not, why not?
76. Why should we trust you?
77. What does this all mean?

BOX 1.2: MEDIA CONSTRAINTS

- **Diversity** – The media are not monolithic. There is wide variety in media types; in their markets and market size; and in the practices and tasks carried out.
- **Subject-matter expertise** – Many journalists lack subject-matter expertise in medicine, statistics and the health sciences.
- **Resources** – Many media organizations do not have the resources needed to prepare background information in advance. In addition, news organizations seldom have the resources needed to maintain offices and reporters in distant sites. As a result, it is often difficult getting reporters and equipment to the site of an emergency.
- **Generalists** – Most journalists are generalists rather than specialists, even in large media organizations.
- **Career advancement** – Journalists often advance in their careers by moving from smaller media markets to larger media markets. One result of this is high staff turnover.
- **Watchdog role** – Many journalists perceive themselves as “watchdogs” of government and industry. They are often suspicious if access to information is denied or if answers to questions are not forthcoming.
- **Scepticism** – Many journalists are wary of developing close professional relationships with government or industry officials. This attitude, however, is often less pronounced during an emergency.
- **Information flow and source dependency** – Journalists are highly dependent upon individuals and organizations for a steady and reliable flow of newsworthy information.
- **Source selection** – Journalists tend to rely on certain types of sources more than others.
- **Newsworthiness** – When covering health and medical controversies, journalists frequently focus on underlying political or social conflict rather than on the science itself. Controversy and conflict are often easier to cover than the details of complex issues.
- **Uncertainty** – Some journalists have a negative view of the cautious and hedging language of scientific and medical experts. As a result, they may seek out less reputable or less well-informed sources who are willing to speak out on an issue with greater certainty and with less caution, even though that certainty may be unfounded.
- **Special populations** – Journalists are often ill equipped to meet the information needs of special populations during health-related emergencies. They also may not see it as their job or role to communicate directly with these audiences.
- **Competition** – Competition within and among media organizations (as well as among journalists) is often intense, especially in larger media markets. Competition is a major source of media sensationalism and inaccuracy.
- **Deadlines** – Journalists assign an extremely high priority to meeting deadlines and almost all face the relentless pace of daily deadlines.

BOX 1.3: INTERNAL MEDIA-RELATIONS CAPABILITIES – AN ASSESSMENT TOOL

1. The organization should have a written plan and documented procedures for interacting with the media during an emergency.
2. The organization should have:
 - an agency staff member and at least one alternate assigned the role and responsibilities of a public information officer in an emergency;
 - a written document that clearly identifies lines of authority and responsibilities for the public information officer and the media communication team during an emergency; and
 - a workplan and relief scheduling plan for a media communication team to maintain 24-hour a day operations, two to three work shifts a day, for several days, weeks or possibly months.
3. The organization should have the following in place:
 - procedures for verification of the accuracy of messages;
 - procedures for clearance of information released to the media, partners and the public;
 - procedures for coordinating with partner organizations to ensure message timeliness, accuracy and consistency; and
 - procedures for liaison between the organization and an emergency operations centre (EOC).
4. The organization should have information kits for reporters prepared in advance that include contact information directories, informational materials, policies, checklists and manuals.
5. The organization should have the following in place:
 - procedures for routing all media calls to the public information officer during an emergency;
 - procedures for responding to routine media requests for information;
 - procedures for triaging media enquiries if requests for information exceed the capacity of the agency;
 - procedures for when, where and how to hold a news conference;
 - procedures for releasing media advisories, news releases and fact-sheets;
 - procedures for monitoring news coverage (for example, to determine messages needed, misinformation to be corrected, and levels of media interest and concern); and
 - procedures for creating situation reports.
6. The organization should have a plan for communicating directly to the public and key stakeholders, including a plan to:
 - set up and staff a specialized telephone information service (or “hotline”) for the public, reporters, clinicians or other key stakeholders during an emergency;
 - set up specialized web sites;
 - monitor public concerns to determine the messages needed;
 - monitor misinformation that needs to be corrected;
 - monitor levels of public concern;
 - monitor levels of employee interest and concern;
 - ensure the accuracy, timeliness, regular updating and relevance of web site information;
 - monitor information on other web sites; and
 - publicize organization contact information.
7. The organization should have a plan for coordinating communications with partner organizations, including a plan to:
 - respond to requests and enquiries from partners and special interest groups;
 - hold briefings for and with partner organizations;
 - translate situation reports, health alerts and meeting notes into information appropriate for partners;
 - log calls from legislators and special interest groups; and
 - set up dedicated communication lines for key partners (for example, police, elected officials, fire departments and hospitals).
8. The organization should have a directory of 24 hours a day 7 days a week contact information for media personnel and public information officers from partner organizations.
9. The organization should have plans for holding community meetings, small group briefings and other face-to-face meetings as appropriate.
10. The organization should periodically assess the media-relations training needs of its own staff and participate with other organizations to assess the media-relations training needs of its partners.
11. The organization should have a designated lead spokesperson (plus back up) for various emergency scenarios.

INTERNAL MEDIA-RELATIONS CAPABILITIES – AN ASSESSMENT TOOL – CONTINUED –

12. The organization should evaluate its desire, need and ability to use the following means to supplement communications through newspapers, television and radio:
 - posters;
 - web sites;
 - toll-free telephone lines;
 - public meetings;
 - email list;
 - text messaging and other mobile telephone messaging services;
 - broadcast fax;
 - letters by mail;
 - newsletters;
 - submissions to partner newsletters;
 - regular or special partner conference calls;
 - door-to-door canvassing;
 - information inserts in public utility bill mailings;
 - community bulletin boards;
 - library bulletin boards;
 - post offices bulletin boards;
 - community civil defence networks;
 - government access channels (for example, on cable television);
 - mass distribution through partners (for example, churches, retailers and restaurants);
 - reverse emergency call (for example, 911) messaging; and
 - local health alert network.
13. The organization should be able to design, develop and produce materials tailored to local needs or draw on the production capabilities of local organizations.
14. The organization should evaluate the need for the following communications personnel:
 - public affairs specialist;
 - web site designer;
 - health educators;
 - audiovisual specialist;
 - graphics illustrator/artist; and
 - translators.
15. The organization should evaluate the need to develop the following in advance:
 - topical fact sheets (for example, descriptions of diseases and treatment information);
 - addenda to topical fact sheets on where to obtain additional information;
 - fact sheets on the organization (with roles, responsibilities and resources);
 - lists of frequently asked questions (FAQs) for various emergency scenarios;
 - fact sheets offering advice to emergency responders, employees, families and friends of victims, parents, health care personnel, and other relevant groups on handling post-traumatic stress and media enquiries;
 - listings of experts and web links containing information on various public health emergency topics;
 - facts sheets containing recommendations for those affected;
 - scripts for telephone operators in multiple languages for various emergency scenarios;
 - holding statements (messages prepared in advance) for various emergency scenarios;
 - news-release templates for various emergency scenarios;
 - training videos; and
 - slide presentations on various emergency scenarios.
16. The organization should have plans for addressing the communication needs of special populations (for example, the elderly, immigrant populations, transient and institutionalized populations).
17. The organization should identify the most effective tools for disseminating information.
18. The organization should have a plan for evaluating, testing and revising the media communication plan.

STEP 2

Develop goals, plans and strategies

2.1: Develop media communication goals and objectives

BOX 2.1 provides an example of a media communication goal statement during an emergency event. The statement has been adapted from an actual public health department document relating to an outbreak of West Nile virus. As always such goals should be adapted to specific local circumstances and needs.

2.2: Develop a written media communication plan

Effective media communication requires a written media communication plan prepared and endorsed by senior management in advance (**BOX 2.2**).

2.3: Develop a partner and stakeholder strategy

In many types of emergencies, public health will be integrated into a larger emergency response system. Public health is thus likely to share leadership with a wide range of governmental and nongovernmental partners, including law enforcement, fire departments, hospitals, emergency medical services, crisis managers, the military and intelligence agencies. Cooperation with partners is a crucial part of effective media communication. Potential partners (**FIGURE TWO**) will bring their own focus, competencies, personality traits and organizational culture. Proactive efforts should be made to establish working relationships with the media before an emergency occurs (**BOX 2.3**).

BOX 2.1: EXAMPLE OF A MEDIA COMMUNICATION GOAL STATEMENT

The goals of the agency in the event of a disease outbreak are to:

- maintain, increase or restore trust as an overriding goal;
- inform and educate governmental authorities, municipal officials, the public and the media regarding:
 - details of the outbreak
 - outbreak prevention measures, including personal protection measures
 - the agency's surveillance plan
 - the agency's response plan
 - disease control methods;
- increase awareness of the disease, its transmission, its prevention and its diagnosis among health care providers, including general and hospital practitioners;
- increase awareness among health care providers of the use of control measures;
- communicate disease control information and recommendations to governmental authorities, municipal officials, the public and media in a timely and efficient manner; and
- collaborate and cooperate with key partners and nongovernmental organizations to review and disseminate communication materials.

INFORMATION POINT: Panic avoidance as a goal

Many communication plans list the avoidance of panic as a major goal. Panic describes an intense contagious fear causing individuals to think only of themselves.

Risk factors for panic include:

- the belief that there is only a small chance of escape;
- the perception that there are no accessible escape routes;
- perceiving oneself at high risk of being seriously injured or killed;
- available but limited resources for assistance;
- perceptions of a "first come, first served" system;
- a perceived lack of effective management of the event;
- a perceived lack of control;
- crowd ("mob") psychology and dynamics; and
- authorities that have lost their credibility.

However, studies indicate that panic is rare, and that most people respond cooperatively and adaptively to natural and man-made disasters. Panic avoidance should never be used as a rationale for false reassurance or for lack of transparency on the part of authorities.

Panic may be more likely following a bio-terrorism attack involving contagious, dreaded or lethal diseases such as plague or smallpox. In such cases, a crucial factor in determining the public response will be the presence, actions and words of respected, credible authorities.

BOX 2.2: BASIC INFORMATION TYPICALLY INCLUDED IN A MEDIA COMMUNICATION PLAN

A media communications plan should:

- describe and designate staff roles and responsibilities for different emergency scenarios;
- designate who is accountable for leading the response;
- designate who is responsible for implementing various actions;
- designate who needs to be consulted during the process;
- designate who needs to be informed about what is taking place;
- designate who will be the lead spokesperson and backup for different scenarios;
- include procedures for information verification, clearance and approval;
- include procedures for coordinating with important stakeholders and partners (for example, with other health agencies, and law enforcement and elected officials);
- include procedures to secure the required human, financial, logistical and physical support and resources (such as people, space, equipment and food) for media communication operations during a short, medium and prolonged public health event (24 hours a day 7 days a week if needed);
- include agreements on releasing information and on ownership (who releases what, when and how);
- include policies and procedures regarding employee contacts from the media;
- outline well thought out contingency plans for various scenarios;
- include regularly checked and updated media contact lists (including after-hours news desks);
- include regularly checked and updated partner contact lists (day and night);
- outline exercises and drills for testing the media communication plan as part of larger preparedness and response training;
- identify subject-matter experts (for example, university professors) willing to collaborate during an emergency, and develop and test contact lists (day and night); know their perspectives in advance;
- identify target audiences;
- identify preferred communication channels (for example, telephone hotlines, radio announcements, news conferences, web site updates and faxes) to communicate with the public, key stakeholders and partners;
- contain holding statements (messages prepared in advance), core messages and message templates;
- contain fact sheets, question-and-answer sheets, talking points and other supplementary materials for potential scenarios;
- contain a signed endorsement of the media communication plan from the agency's director;
- contain procedures for posting/updating information on a web site;
- contain task checklists for the first 2, 4, 8, 12, 16, 24 and 48 hours; and
- contain procedures for evaluating, revising and updating the media communication plan on a regular basis.

FIGURE TWO: WORKSHEET FOR IDENTIFYING ORGANIZATIONS AND INDIVIDUALS TO BE CONTACTED DURING AN EMERGENCY

Group	Notifications (check those that apply)	Contact	Tel/Fax day/night
Local government	Local health officer		
	Local health department public information officer		
	Local government officials		
	Local government public information officer		
	Local emergency response organizations (for example, fire, police, emergency management services and law enforcement)		
	Local emergency response organization public information officers		
	Local hospitals		
	Other		
Regional government	Regional health director		
	Regional health department public information officer		
	Regional government executive office		
	Other regional government officials		
	Other		
National government	National health director		
	National health director public information officer		
	National government executive office		
	Other national government officials		
	Other		
International organizations	WHO regional office		
	WHO country office		
	Other international organizations		
	Nongovernmental organizations		
	Other		
Local, regional, national and international media organizations			
Other partner and stakeholder organizations (for example, experts at local universities and in the scientific community)			
Others			

INFORMATION POINT: Common mistakes in working with partners

- lack of listening, caring and empathy;
- inadequate access;
- inadequate relationship building prior to an emergency;
- lack of clarity in messages;
- lack of dedication and commitment;
- lack of respect for core values and protocols;
- lack of resources;
- misreading of strengths and weaknesses;
- perceptions of arrogance;
- misreading the credibility brought to the situation;
- lack of consistency in messages, data and tone;
- lack of timeliness;
- lack of coordination and synchronization;
- competition for visibility and publicity; and
- not understanding needs or motivations.

BOX 2.3: ESTABLISHING WORKING RELATIONSHIPS WITH THE MEDIA BEFORE AN EMERGENCY OCCURS**Outreach efforts should include:**

- identifying and meeting with reporters and editors who cover your organization;
- exchanging contact information with media organizations (telephone, fax and email);
- arranging ad hoc or periodic meetings with editorial boards;
- holding roundtable discussions to receive feedback from reporters or editors;
- holding briefing sessions to share information about your organization; and
- inviting reporters to participate in preparedness drills and training exercises.

Before pursuing these activities:

- determine your goals – for example, better communication, better relationships or better reporting;
- determine your specific objectives – for example:
 - obtaining feedback from reporters on your performance – both generally and issue-specific (“How are we doing”? “How could we improve”? “How can we work together better in the future”?)
 - improving reporters’ knowledge of your organization’s plans and procedures for responding to an emergency
 - informing reporters on important public health concepts, issues and topics, such as disease characteristics; infectious disease control procedures; toxicology and epidemiology; agents that might be used by terrorists (for example, biological, chemical, explosive and radiological); risk communication; incident command systems; the legal constraints on public health policy and practice; and guidelines for reporters on how to protect themselves, their crews and their equipment during a public health emergency;
- share your media communication goals and objectives with others in your organization – get feedback;
- determine which media (for example, local, provincial, regional or national) to include in your outreach efforts;
- recognize that media outreach efforts now may or may not produce more favourable news coverage by reporters; and
- expect no favours.

INFORMATION POINT: Considerations when developing relationships with partners

- Which partners are most important for each type of emergency situation (for example, infectious disease outbreaks in human or animal populations, bio-terrorism, chemical explosions, nuclear and radiological events or natural disasters)?
- What issues are most important to the partner organization?
- How can the partner organization contribute and help?
- What resources can the partner organization bring?
- What are the partner organization's strengths and weaknesses?
- What credibility does the partner organization bring to the situation?
- Will the partner organization commit to collaborating in and coordinating message development?
- Will the partner organization commit to the joint release of information?
- How will joint statements be issued?
- What message clearance and approval process will be followed?
- Who will be the point of contact in the partner organization?
- What is the overall nature of the existing relationship? For example, is it currently:
 - apathetic
 - neutral
 - supportive
 - non-supportive
 - critical
 - adversarial
 - ambivalent?
- What specific issues are likely to be points of agreement or disagreement?
- What are the partner organization's expectations in an emergency (for example, in regards to level of involvement)?

STEP 3

Train communicators

3.1: *Train* the media communication team

Members of the media communication team should receive training in all the seven steps listed in this field guide in addition to general training in public health issues. **BOX 3.1** shows the content areas of a sample public health emergency communications training agenda that could also be usefully provided to agency leaders and technical experts. In all cases, training should be adapted in line with local practices.

3.2: *Train* a public information officer

A well-trained public information officer (PIO) or the equivalent, trained in both communications and public health, is a necessary requirement for effective media communications during public health emergencies (**BOX 3.2**).

3.3: *Train* a designated lead spokesperson

In almost all emergencies, a designated lead spokesperson possessing the personal and professional characteristics listed in **BOX 3.3** is also a necessity. The public and media tend to like and trust a familiar face and voice. The image or voice of the lead spokesperson is often the first message an organization sends out during an emergency. As a result, they need to be very aware of the potential pitfalls outlined in **BOX 3.4**. These include non-verbal communications. In Western European and American cultures, non-verbal messages that are interpreted highly negatively or highly positively are shown in **BOXES 3.5** and **3.6** respectively.

BOX 3.1: OUTLINE CONTENTS OF A SAMPLE PUBLIC HEALTH EMERGENCY COMMUNICATIONS TRAINING AGENDA

1. Developing effective messages during an emergency
2. Communication pitfalls and solutions
3. Methods and means of effective communication outreach
4. Verbal and non-verbal communication skills
5. Working with the media during an emergency
6. Conducting effective communication drills, exercises and role-playing

BOX 3.2: MEDIA COMMUNICATION COMPETENCIES OF PUBLIC INFORMATION OFFICERS

A public information officer should be able to:

- describe the roles and responsibilities of a public information officer during a public health emergency;
- demonstrate skills in written and oral communication;
- communicate effectively with partner agencies involved in an emergency;
- demonstrate skills in team building, negotiation and conflict resolution;
- develop a media communication plan integrated with the overall emergency response plan of the organization;
- develop and maintain files of up-to-date informational materials and resources for various emergency scenarios (for example, fact sheets related to chemical, biological and radiological agents);
- develop and maintain staffing plans for a 24 hours a day 7 days a week response to an emergency;
- select and prioritize media outlets;
- compile media contact lists, partner contact lists and expert contact lists;
- develop and operate a multi-agency Joint Information Centre (JIC);
- access, use, interpret and display emergency-related data;
- describe basic principles for communicating effectively to the media in an emergency;
- describe the basic elements of the organization's emergency operations plan;
- train other spokespersons;
- develop, evaluate and implement media communication exercises and drills;
- operate communication equipment identified in the media communication plan (phone lines, telephone banks, computers, walkie-talkies, personal digital assistants, cameras, copiers, fax machines and radios);
- develop and deliver event-specific information to:
 - the media
 - partner organizations
 - agency staff and employees
 - other government agencies
 - nongovernmental organizations
 - the public; and
- remain calm, and convey confidence and composure under pressure.

BOX 3.3: PERSONAL AND PROFESSIONAL CHARACTERISTICS OF A DESIGNATED LEAD SPOKESPERSON

The designated lead spokesperson should:

- possess excellent media skills;
- have sufficient authority or expertise to be accepted as speaking on behalf of the organization;
- possess or work to develop good professional relationships with important members of the media and other important partners and stakeholders;
- be:
 - perceived as authoritative and credible by stakeholders, partners and the public
 - at ease with the media
 - knowledgeable (generally and specifically) about the emergency, its dynamics and its management
 - a subject-matter expert on the event or able to delegate to subject-matter experts
 - resourceful; and
- be able to:
 - learn quickly
 - respond to sensitive questions within their areas of expertise in a professional and sensitive manner
 - effectively respond to hostile questions
 - stay on message yet remain flexible and able to make decisions quickly
 - offer examples, anecdotes and stories
 - provide effective on-the-spot responses to media enquiries
 - express technical knowledge or complex information in a way that can be easily understood by reporters and by the average person
 - remain calm and composed at all times
 - express caring, listening, empathy and compassion
 - work well under pressure or high emotional strain
 - accept constructive feedback
 - share the spotlight
 - call on the expertise of others
 - give thanks to others and distribute praise
 - take responsibility for things that go wrong
 - present the appropriate tone for the audience
 - defer, delegate and redirect questions to others as needed.

BOX 3.4: PITFALLS TO AVOID WHEN COMMUNICATING WITH THE MEDIA DURING AN EMERGENCY

- **Don't assume you are the right person to be interviewed** – Negotiate with the reporter about the specific topic of the interview to ensure you are the appropriate spokesperson.
- **Don't assume you know what the first question from the reporter will be** – Ask the reporter in advance what the first question will be. Your second answer will depend on your first answer.
- **Don't allow the interview to stray from the topic** – Offer to cover additional topics during a separate interview. Alternatively, offer to put the reporter in touch with someone who is better able to respond than you if needed.
- **Don't let a reporter put words in your mouth** – The reporter may use inflammatory or emotionally laden words. Do not repeat them.
- **Don't accept a question that is improperly framed** – rephrase a question if it contains leading or loaded language, and then answer the question.
- **Don't assume the reporter has it right** – Be on guard for claims that someone has made an allegation or has shared damaging information. Instead of reacting to such information, say: "I have not heard that" or "I would have to verify that before I could respond". Do not allow the reporter to start a fight.
- **Don't volunteer more than you want to say** – If a reporter persists after you've answered the question, then stop. Do not answer the question again or add to your answer. Instead, wait for the next question or say: "That was my answer. Do you have another question that you would like me to address"? Say it without sarcasm, defensiveness or annoyance.
- **Don't go "off the record"** – There is no such thing as "off the record".
- **Don't assume your knowledge or position alone qualifies you to answer questions** – Anticipate questions. Work with your colleagues and your public information officer to anticipate as many expected questions as possible and draft the answers to as many as time permits. Nuances count. A word change here or there may make the difference to how well your answer is received. Write your first draft of the answers then edit them or have them edited. Find the key words and the bottom line – what is the point you want to make? What rings true and doesn't sound evasive?
- **Don't go into an interview without at least three key messages** – Have prepared message points and make them at the very start of the interview. Try to get across your key message points in sound-bite format in fewer than 27 words and less than 9 seconds. Be prepared to elaborate on your prepared message points.
- **Don't guess or fake it** – If you do not know the answer or cannot answer, say so. Give the reason why you do not know or can't answer. For example, if it's not in your area of expertise, say so.
- **Don't speak disparagingly of others, not even in jest** – Do not assign blame either. Stick to what you know and what your organization is doing. Do not fight your battles using the media. If you do not have something nice to say, say nothing. Remind reporters that professionals often have legitimate differences of opinion.
- **Don't buy into extreme or baseless "what if" questions** – Rephrase the question in a way that addresses the legitimate concerns of the public.
- **Don't depend on the reporter to remember what was said** – Use a tape recorder to record sensitive interviews, if necessary. Be sure the reporter knows you are doing this before the interview.
- **Don't ask reporters to allow you review their articles or interviews** – Offer to clarify information for them as they prepare their story. If a reporter shows you the story, understand he or she expects you to correct errors of fact not viewpoints that may differ from yours.
- **Don't try to answer all parts of a multiple-part question** – Break down multiple-part questions and answer each part separately.
- **Don't raise issues you do not want to see in print or on the news.**
- **Don't say "no comment" to a reporter's question** – People often interpret "no comment" statements as showing guilt, hiding something, lying or covering up. Instead, state why you cannot answer the question. For example, say the matter is under investigation, the organization has not yet made a decision, or simply that you are not the right person to answer the question. If appropriate, indicate follow-up actions you are willing to take, including referrals or providing further information by the reporter's deadline.
- **Don't assume you have been quoted correctly** – Have someone monitor media coverage and check whether your statements were edited incorrectly or out of context. If significant errors are discovered, seek further coverage to correct mistakes and get your points across.
- **Don't miss the reporter's deadline** – If you miss the reporter's deadline, your perspective may go unrepresented in the reporter's story.
- **Don't assume that facts speak for themselves or that the interview will be easy.**

BOX 3.5: NEGATIVELY PERCEIVED NON-VERBAL COMMUNICATION

Poor eye contact	<i>dishonest, closed, unconcerned, nervous, lying</i>
Sitting back in chair	<i>not interested, unenthusiastic, unconcerned, withdrawn, distancing oneself, uncooperative</i>
Arms crossed on chest	<i>not interested, uncaring, not listening, arrogant, impatient, defensive, angry, stubborn, not accepting</i>
Infrequent hand gestures/body movements	<i>dishonest, deceitful, nervous, lack of self-confidence</i>
Rocking movements	<i>nervous, lack of self-confidence</i>
Pacing back and forth	<i>nervous, lack of self-confidence, cornered, angry, upset</i>
Frequent hand-to-face contact/ resting your head in your hands	<i>dishonest, deceitful, nervous, tired, bored</i>
Hidden hands	<i>deceptive, guilty, insincere</i>
Speaking from behind barriers (podiums, lecterns, tables)	<i>dishonest, deceitful, formality, withdrawn, distancing oneself, unconcerned, not interested, superior</i>
Speaking from an elevated position	<i>superiority, dominant, judgemental</i>
Speaking indoors behind a desk	<i>bureaucratic, uncaring, removed, distant, uninvolved</i>
Touching and/or rubbing nose	<i>doubt, disagreement, nervous, deceitful</i>
Touching and/or rubbing eyes	<i>doubt, disagreement, nervous, deceitful</i>
Pencil chewing/hand pinching	<i>lack of self-confidence, doubt</i>
Jingling money in pockets	<i>nervous, lack of self-confidence, lack of self-control, deceitful (hint: empty change from your pockets beforehand)</i>
Constant throat clearing	<i>nervous, lack of self-confidence</i>
Drumming on table, tapping feet, twitching, etc.	<i>nervous, hostile, anxious, impatient, bored</i>
Head in hand	<i>bored, tired, frustrated</i>
Clenched hands	<i>anger, hostile, uncooperative</i>
Locked ankles/squeezed hands	<i>deceitful, apprehensive, nervous, tense, aggressive</i>
Palm to back of neck	<i>frustration, anger, irritation, hostility</i>
Tight-lipped	<i>nervous, deceitful, angry, hostile</i>
Licking lips	<i>nervous, deceitful</i>
Frequent blinking	<i>nervous, deceitful, inattentive</i>
Slumping posture	<i>nervousness, poor self-control</i>
Raising voice/high-pitched tone of voice	<i>nervous, hostile, deceitful</i>
Shrugging shoulders	<i>unconcerned, indifferent</i>

BOX 3.6: POSITIVELY PERCEIVED NON-VERBAL COMMUNICATION

Excellent eye contact	<i>honest, open, competent, caring, empathetic sincere, dedicated, confident, knowledgeable, interested</i>
Sitting slightly forward in chair	<i>interested, enthusiastic, concerned, cooperative</i>
Open hands	<i>open, sincere</i>
Speaking outdoors in low-wind conditions	<i>dedicated, hardworking, involved, concerned</i>
Hand to chest/heart region	<i>open, honest, dedicated, sincere</i>
Erect posture	<i>self-confident, self-controlled, assertive, determined</i>
Lowering voice	<i>self-assured, honest, caring</i>

STEP 4

Prepare messages

4.1: *Prepare* lists of stakeholders and their concerns

Every emergency typically involves a different set of stakeholders including the public and other interested, affected or influential parties (**BOX 4.1**). One important step in preparing target messages is identifying, understanding and addressing the questions and concerns of important stakeholders (**BOX 4.2**). Messages can then be developed and delivered in response to these. Once the lists of stakeholders and their concerns during a specific emergency situation are produced, a very useful next step can be to develop a **matrix** showing the stakeholders on one axis and their questions and concerns on the other (**FIGURE THREE**).

4.2: *Prepare* clear and concise messages

A key step in effective media communication is to develop clear and concise messages that address stakeholder questions and concerns. One of the most powerful tools for preparing clear and concise messages is the **message map** (**FIGURE FOUR**). A message map consists of detailed and hierarchically organized information that can be used to respond to anticipated questions or concerns. Numerous public health agencies have conducted message-mapping projects focused on a range of public health issues, including bio-terrorist events and disease outbreaks. Emergency events that have already been mapped include smallpox, plague, botulism, viral haemorrhagic fevers, tularemia and pandemic flu. Recent studies indicate that it is vital that key messages be concisely stated if they are offered to the news media as sound bites or quotes.

If at all possible, information to be included in a **news release** should be prepared in advance. A news release¹ tells reporters the basic who, what, when, where, why and how of an event. Most importantly, a news release should quickly convey the vital information. **FIGURE FIVE** shows a sample template for a news release. Although it can be used as shown, the sample is meant only to provide guidance as a single template structure will not work for every situation and should be modified for local application.

4.3: *Prepare* targeted messages

People experiencing extreme high stress and anxiety are a key audience. Reaching these individuals through the media requires in-depth awareness and understanding of their feelings and state of mind. Communicating badly can lead to additional stress, anxiety, confusion and resentment. Communicate well and people are more likely to understand, accept, cope and adjust. It is common for individuals involved in a public health emergency to experience extreme stress and anxiety, and to exhibit a wide range of thoughts, feelings and behaviours. Extreme stress and anxiety can overwhelm an individual's ability to cope.

¹ The term "news release" and "press release" are often used synonymously. The term "press release" harks back to an earlier time when newspapers dominated.

BOX 4.1: EXAMPLES OF STAKEHOLDERS DURING A MAJOR DISEASE OUTBREAK

- governmental and nongovernmental authorities;
- the media;
- public at large and at risk;
- victims and their families;
- emergency response personnel;
- public health authorities and agencies (local, regional, provincial, national and international);
- physicians, nurses, paramedics and other healthcare personnel;
- veterinarians;
- fire department personnel;
- police and other law enforcement personnel;
- hospital personnel;
- health agency employees;
- families of emergency responders, law enforcement personnel, hospital personnel, and health agency employees;
- government agencies (regulatory and non-regulatory) at all levels;
- employees of other responding organizations;
- politicians/legislators/elected officials;
- union officials and labour advocates;
- legal professionals;
- contractors;
- consultants;
- suppliers/vendors;
- ethnic populations;
- racial populations;
- minority populations;
- institutionalized populations;
- elderly populations;
- religious groups;
- special language groups;
- disabled populations;
- homeless people;
- home-bound populations;
- other vulnerable populations;
- illiterate populations;
- tourists or business travellers and their relatives;
- local residents that are out of town and their relatives;
- security personnel;
- service and maintenance personnel;
- advisory panels;
- nongovernmental organizations (NGOs);
- educational leaders and community (all levels);
- scientific leaders and community;
- business leaders and community;
- military leaders; and
- professional societies.

BOX 4.2: POTENTIAL CONCERNS IN A PUBLIC HEALTH EMERGENCY

- informational concerns – who, what, where, when, why and how?
- human health concerns
 - one's own
 - children
 - parents
 - friends and family
 - elderly persons
 - expectant mothers
 - special populations
 - others;
- pet concerns;
- livestock concerns;
- wildlife concerns;
- safety concerns;
- ecological and environmental concerns;
- economic concerns;
- quality-of-life concerns;
- equity and fairness concerns;
- cultural and symbolic concerns;
- legal and regulatory concerns;
- honesty and openness concerns;
- transparency and access-to-information concerns;
- accountability concerns;
- future-generational concerns;
- ethical and morality concerns;
- change concerns;
- chaos and loss-of-control concerns;
- panic concerns; and
- trust concerns.

INFORMATION POINT: Risk-perception and fear factors

Risks and threats are generally more worrisome, anxiety producing, stressful and fearsome if they are perceived to:

- be caused by an invisible or non-observed agent;
- be involuntary or imposed;
- be inequitably distributed;
- be inescapable;
- be under the control of others, especially those we don't trust;
- arise from an unfamiliar or novel sources;
- result from man-made rather than natural sources;
- cause hidden and irreversible damage;
- pose some particular danger to small children, pregnant women or more generally to future generations;
- threaten a form of death (or illness/injury) that is particularly dreaded;
- threaten or harm identifiable rather than anonymous or theoretical victims;
- pose a personal threat by singling you out from others;
- offer little or no compensating benefits;
- be new and poorly understood by science; and
- be subject to contradictory statements.

FIGURE THREE: MATRIX OF STAKEHOLDERS AND THEIR CONCERNS

Stakeholders	Concerns													
	Human health	Trust	Safety	Environmental	Information	Ethics	Economics	Responsibility	Legal	Process	Pets/livestock	Religious	Fairness	Other
Governmental and nongovernmental authorities														
Public at large and at risk														
Media														
Victims and their families														
Emergency response personnel														
Public health personnel														
Physicians/nurses/veterinarians														
Law enforcement personnel														
Hospital personnel														
Health agency employees														
Other														

FIGURE FOUR: MESSAGE MAP TEMPLATE

Stakeholder:		
Question or Concern:		
Key Message 1	Key Message 2	Key Message 3
Supporting Information 1-1	Supporting Information 2-1	Supporting Information 3-1
Supporting Information 1-2	Supporting Information 2-2	Supporting Information 3-2
Supporting Information 1-3	Supporting Information 2-3	Supporting Information 3-3

INFORMATION POINT: Examples of technical terms used in public health that may not be understood by the public

- Age-adjusted mortality rate
- Attributable risk
- Carcinogen
- Confidence interval
- Control group
- Dose-response
- Epidemiology
- Incidence rate
- Morbidity
- Mortality
- Mutagen
- Odds ratio
- Prevalence
- Prophylactic
- Reference dose
- Relative risk
- Standard deviation
- Statistical significance
- Surveillance
- Toxicology
- Variance
- Vector

INFORMATION POINT: Contents of a news release

- Insert headline.
- Insert the key messages to the public.
- Insert 2–3 sentences describing the current situation.
- Insert quote from the lead spokesperson or agency head demonstrating leadership and concern.
- List actions currently being taken.
- List actions that will be taken next.
- List information on possible reactions of the public and on ways the public can help.
- List contact information, ways to get more information from the agency, links to other organizations and other resources.

FIGURE FIVE: SAMPLE NEWS RELEASE TEMPLATE

[ORGANIZATION'S NAME ON LETTERHEAD]

NEWS RELEASE

FOR IMMEDIATE RELEASE

For more information, contact:

[DATE]

[Name of internal media representative/contact person]

[Name of organization]

[Telephone number]

[Fax number]

[Email address]

[After-hours telephone number]

[Web site for more information]

[Headline goes here, initial cap, bold]

[CITY, State] – [Date] – [Text goes here, double-spaced, indented paragraphs]

[First paragraph: short (less than 30–35 words); contains the most important information]

[Second paragraph: contains the who, what, why, where, when of the story. Try to include a quote from the lead spokesperson or agency leadership within the first few paragraphs]

If the news release is more than one page long, use:

– more –

Centre the word at the bottom of the page, then continue onto the next page with a brief description of the headline, and page number as follows:

[Shortened headline] – Page 2

[The last paragraph should be an organization boilerplate, which is a brief description of the organization, and any information considered useful for people to know, such as type of organization, its location and web site address]

At the end of the release put:

End or ###

centred at the bottom. This lets the reporter/reader know they have come to the end.

End

INFORMATION POINT: Guidelines for preparing clear and concise messages during public health emergencies

- identify what you most want the target audience to know;
- identify what you need to do to correct misperceptions or erroneous information;
- prepare three key messages that communicate your overarching (core) talking points;
- prepare supporting message points for each key message;
- develop supporting material for each message (for example, visuals, examples, quotes, personal stories, analogies, endorsements by credible third parties, or directions for obtaining additional information);
- keep messages simple and short;
- document in writing the recommended messages and supporting material; and
- practise delivery.

INFORMATION POINT: Communicating effectively to individuals experiencing extreme stress or anxiety

Recognize that communications success depends upon:

- a trusting relationship between communicator and audience;
- the attitude and knowledge of the communicator; and
- the clarity and salience of the message.

Tailor messages to specific groups, such as:

- first responders;
- health-care workers;
- victims;
- families of victims; and
- parents.

Consider messages that:

- create a feeling of competence ("Help people to help themselves");
- encourage people to create support systems to supplement formal and external assistance; and
- channel negative responses into positive action.

INFORMATION POINT: Summary guidelines for simplifying interviews, presentations and messages

Meet the audience more than halfway

- the higher the level of stress, fear or anxiety, the greater the need to simplify the language and to carefully structure communications;
- use the readability utility included with most word-processing software to measure the readability level of the information; and
- aim to produce messages that are easily understood by the target audience.

Use clear language

- provide no more than 3 message points or ideas at a time;
- use simple and correct grammar;
- use short sentences;
- be careful when providing numbers – these can easily be misinterpreted or misunderstood; and
- avoid the use of jargon, acronyms and new terms, and:
 - define new terms so that the target audience can understand them
 - use short sentences to define new terms
 - provide a glossary
 - introduce the concept before introducing a new term or explain the new term soon after using it
 - if possible, ask the audience to identify terms that are not understood
 - check frequently for understanding
 - use new terms only if it is important for the target audience to know and remember them
 - be careful when using technical words that have a different meaning from their common usage.

Delivery

- test messages with people who have only a limited knowledge of the topic;
- provide your audience with advance warning when complex or difficult material will be shared;
- break down complex topics into smaller parts;
- use the “Triple T Model” for presenting complex information – tell your audience briefly what you are going to tell them; tell them more about each point; tell them again briefly what you told them;
- ask questions designed to uncover the intuitive mental models used by the audience to understand the topic – correct misconceptions if needed;
- develop materials with which people can interact, such as material on web sites;
- use the active voice for writing and speaking; and
- provide complex information in tiers or layers of information that increase gradually in complexity.

Presentation

- use visuals (for example, graphics, drawings, maps, charts, flowcharts, paintings, photographs, video and highlighted text) to enhance comprehension;
- use simple graphics
 - whose main point can be grasped in less than 3 seconds
 - that contain no more than 1–2 main points
 - that put the main point of the graphic in writing in the graphic itself
 - that use one graphic per point in a sequenced set of graphics
 - that use simple formats, such as bar graphs and pie charts;
- use flowcharts or outlines for complicated issues;
- use colour;
- use colours to enhance meaning, but do not depend on colours to convey your message;
- beware of colours that are difficult to distinguish from surrounding colours;
- when using black and white, it is often difficult to distinguish various shades of grey;
- beware of colours that convey their own messages, which can vary between cultures;
- determine if the material is consistent with culturally accepted ways of presenting or accessing information; and
- respect and allow for the diverse nature of the target audience – for example, enlarge the type face and font size for audiences who are elderly or sight-impaired.

STEP 5

Identify media outlets and media activities

5.1: *Identify* available media outlets

In most parts of the world, there is a wide range of potential media and media outlets that can be used to reach the intended or targeted audience (**BOX 5.1**). The choice of media and the strategies to be used may need to be reviewed as the emergency develops because people may change their listening, reading and other information-seeking habits. Engagement with the mass news media should always be only one aspect of a larger communication strategy during public health emergencies. To facilitate this, the worksheet presented in **FIGURE SIX** should be used in advance to identify and profile media outlets serving the community and a media communications strategy planned accordingly.

5.2: *Identify* the most effective media outlets

Each potential media outlet will have its own advantages and disadvantages. Identifying the most effective and appropriate outlets in any given situation requires an awareness of the characteristics of each (**BOX 5.2**).

5.3: *Identify* media activities for the first 24–72 hours

All actions taken within the initial phase of a public health emergency are operationally crucial in that first impressions are lasting impressions. For this reason it is essential that public health emergencies are both anticipated and prepared for. In this way, media activities during the first 24–72 hours can more easily be carried out in accordance with the guidelines set out in **BOX 5.3**.

BOX 5.1: POTENTIAL MEDIA COMMUNICATION OUTLETS

- news releases;
- news briefings and conferences (in person and by telephone);
- interviews on television or radio news programmes;
- interviews on radio or television talk shows;
- call-in programmes (radio or television);
- interviews in weekly or monthly journals and magazines;
- interviews in trade or professional publications;
- briefings for editorial boards of news organizations;
- web sites – including the agency's public site as well as dedicated sites for specific users or events;
- public address systems;
- public service announcements;
- telephone hotlines and toll-free numbers;
- email;
- faxes;
- short wave radio;
- paid advertisements
- flyers, brochures and circulars;
- presentations for local community organizations, service clubs, religious organizations and voluntary organizations;
- participation in already-planned community events;
- billboards;
- direct mailings;
- displays and exhibits;
- CDs;
- audio tapes;
- information centres;
- text messages on mobile telephones;
- mobile and cell phone voice mail;
- pagers;
- newsletters; and
- folk and traditional media (for example, storytelling).

BOX 5.2: FACTORS TO CONSIDER IN DETERMINING THE MOST EFFECTIVE WAYS OF REACHING TARGET AUDIENCES

- target audience;
- complexity of messages;
- degree of urgency;
- timeliness;
- cost;
- staffing needs;
- media interest; and
- the message itself and how it will be used.

FIGURE SIX: IDENTIFYING AND PROFILING MEDIA OUTLETS

<u>Media</u>	<u>Contact information</u>	<u>Position and past coverage of the issue</u>
Newspapers		
Radio stations		
Television stations		
Newsletters		
Bulletin boards (conventional and computerized)		
Web sites		
Community newsletters		
Traditional and folk media		
Other		
This form should be adapted to meet local needs		

BOX 5.3: ACTIVITY GUIDELINES FOR THE FIRST 24–72 HOURS AFTER NOTIFICATION AND VERIFICATION OF A PUBLIC HEALTH EMERGENCY

General

- ensure the leadership of the organization is aware of the emergency;
- activate the media communication plan and team;
- use the communication plan's notification list to ensure the organization's chain of command is aware that the plan has been activated;
- provide the leadership with an assessment of the emergency from a media perspective; and
- inform the leadership of the specific steps being taken to proactively and reactively interact with the media.

Coordination

- contact local, provincial, regional, national and international partners using predetermined contact lists;
- add names and organizations to the contact list as appropriate, based on the event;
- seek to arrange face-to-face meetings with partners;
- if a crime may have been committed, contact law-enforcement partners;
- activate the lead media spokespersons as designated in the media communication plan;
- call in extra media communication staff in line with the media communication plan;
- establish roles and responsibilities; and
- contact public information officers from all responding organizations.

Media

- provide a statement that shows that the organization is aware of the emergency and that details the steps being taken;
- give directions to the media on how to obtain updates; and
- start monitoring the media (including the internet) for misinformation and rumours that may need to be corrected.

Public

- activate the public information response system (for example, telephone hotlines) if you anticipate that the public will be seeking information directly from the organization;
- acknowledge uncertainty;
- ensure all public statements contain appropriate levels of empathy, caring, concern and compassion, especially regarding losses;
- provide only facts that have been verified and cleared;
- refer the public to other information sites, as appropriate;
- remind the public that the organization has a process in place to respond to the emergency; and
- start monitoring requests for information to identify trends (**FIGURE SEVEN**).

Partners and stakeholders

- send draft media statements to partners for coordination and, if needed, approval;
- use pre-arranged notification systems to alert partners;
- engage the leadership to make important phone calls to partners and leaders of key stakeholder organizations;
- use the internal organizational communication system to notify employees of the emergency;
- ask employees for their support;
- assign tasks to team members, and set hours of operation accordingly; and
- establish a location from which you can conduct joint operations – for example, a multi-agency Joint Information Centre (JIC).

These guidelines should be adapted to meet local needs

FIGURE SEVEN: WORKSHEET FOR TRACKING ENQUIRIES WITHIN THE FIRST 24–72 HOURS OF AN EMERGENCY

Time of enquiry: _____

Nature of enquiry: _____

Specific information requested:

a. Topic 1: _____

b. Topic 2: _____

c. Topic 3: _____

d. Topic 4: _____

Type of enquiry:

a. For information (if so, what): _____

b. For recommendation (if so, what): _____

c. For action (if so, what): _____

d. Other: _____

Feedback to leadership:

a. Complaint: _____

b. Rumour: _____

c. Misinformation: _____

d. Other: _____

Outcome of call:

a. Able to respond to person: _____

b. Not able to respond to person: _____

c. Referred person to: _____

d. Other: _____

Further action needed:

a. None: _____

b. Provide further information: _____

c. Return call: _____

Urgency level (Check one):

_____ Critical (respond immediately)

_____ Urgent (respond within 24 hours or less)

_____ Routine

Enquiry taken by: _____

Date: _____

This form should be adapted to meet local needs

STEP 6

Deliver messages

6.1: *Deliver* clear and timely messages

Getting the overarching message across to the intended audience is the ultimate aim of message-delivery activities. During media exchanges it is crucially important to focus on a few key messages that are timely, accurate, clear, concise, credible and memorable. One technique for ensuring this is to use “bridging statements” that link one message to another (**BOX 6.1**). By using bridging techniques, a spokesperson can focus the interview on what is most important, relevant and critical. It also gives the spokesperson a strong sense of control and ownership.

6.2: *Deliver* messages to maintain visibility

Time is precious during an emergency, and delays in acquiring and distributing information can be very difficult to overcome. As a result, other (possibly less trustworthy) sources may move to fill the information voids. Do not wait – it is better to come out early and say that information is preliminary and that updates will be forthcoming. Convening regular media events helps reporters and adds an element of predictability to the situation.

News conferences can be major undertakings and often require much work and preparation to be successful. As with all media events, it is best to plan them in advance, even if they are only minutes or hours away. A news conference is typically held to announce a major event, decision or news item (such as the release of a report, a new policy, a policy change or the announcement of an actual emergency). They can also be used to draw attention to a particular public health issue. Following a news conference, any significant errors in reporting can be corrected in accordance with the process outlined in **BOX 6.2**.

6.3: *Deliver* targeted messages

Cooperation from the media is often needed to deliver targeted public health messages during an emergency. Journalists, however, may have different interests and may not assign the same priority as public health officials to such messages. As a result, public health officials must engage in special efforts to make their messages more interesting, relevant and attractive both to the media and to the target audience (**BOX 6.3**). One of the first steps in delivering targeted and effective messages is to find out what the reporter needs and wants. One way of achieving this is to ask the reporter a series of questions – both topic-related (**BOX 6.4**) and procedural (**BOX 6.5**) – before the interview.

BOX 6.1: THE 33 MOST FREQUENTLY USED BRIDGING STATEMENTS

1. And what's most important to know is...
2. However, what is more important to look at is...
3. However, the real issue here is...
4. And what this all means is...
5. And what's most important to remember is...
6. With this in mind, if we look at the bigger picture...
7. With this in mind, if we take a look back...
8. If we take a broader perspective...
9. If we look at the big picture...
10. Let me put all this in perspective by saying...
11. What all this information tells me is...
12. Before we continue, let me take a step back and repeat that...
13. Before we continue, let me emphasize that...
14. This is an important point because...
15. What this all boils down to is...
16. The heart of the matter is...
17. What matters most in this situation is...
18. And as I said before...
19. And if we take a closer look, we would see...
20. Let me just add to this that...
21. I think it would be more correct to say...
22. Let me point out again that...
23. Let me emphasize again...
24. In this context, it is essential that I note...
25. Another thing to remember is...
26. Before we leave the subject, let me add that...
27. And that reminds me...
28. And the one thing that is important to remember is...
29. What I've said comes down to this...
30. Here's the real issue...
31. While... is important, it is also important to remember...
32. It's true that... but it is also true that...
33. What is key here is...

INFORMATION POINT: Contents of a media kit or packet

- news releases;
- fact sheets;
- biographies of speakers, subject-matter experts and others as appropriate;
- contact numbers;
- copies of any reports or documents that would be useful to reporters covering the event;
- visual material (such as maps, charts, timelines, diagrams, drawings and photographs); and
- other materials as appropriate.

INFORMATION POINT: Holding a news conference

- Make your formal opening statement brief – around 5 minutes and definitely less than 10 minutes.
- Make sure you mention all pertinent information (for example, who, what, where, when, why and how) in your opening statement.
- Allow time for questions (typically at least 10–15 minutes).
- As a general rule, limit the number of speakers to no more than three.
- If additional people are available to answer questions, have them sit in the front row or off to the side.
- As a general rule, limit each speaker to no more than 5 minutes.
- Start on time – journalists work to deadlines and need time to complete their story in time.
- Remember that a news conference is held primarily to allow the media to ask questions, not attend a lecture.

BOX 6.2: CORRECTING ERRORS IN MEDIA REPORTING**If there is an error in the story:**

- Remain calm and composed when speaking to reporters or editors about errors and mistakes.
- Contact the reporter directly and point out errors only if the errors are significant.
- Do not complain about trivial mistakes or omissions.
- Ask the reporter to amend the office file copy of the story.
- Consider asking the reporter to make an appropriate change in their next story – note however that this can be controversial and lead to a difficult relationship with the journalist.
- Avoid embarrassing the reporter by naming them during a news or press conference or briefing.
- Avoid if possible going to the reporter's editor or producer – this should only be done if there is a major mistake, and if the reporter will not acknowledge the mistake and make the requested correction. By going over the reporter's head, you may ruin any working relationship you have developed.
- If the error occurs in the stories of several different reporters, or if the story is picked up by a wire service, and if the error is deemed major, then correct the error during the next news release, media briefing or news conference without naming the individuals responsible for the error.
- Recognize the difference between errors and differences in points of view – differences in points of view will generally not be corrected.

BOX 6.3: STRATEGIES FOR DELIVERING TARGETED MESSAGES**To communicate voluntariness – deliver messages that:**

- make the risk more voluntary;
- encourage public dialogue by using two-way communication channels;
- ask permission; and
- ask for informed consent.

To communicate controllability – deliver messages that:

- identify things for people to do (for example, precautions, preventive actions and treatments);
- indicate your willingness to cooperate and share authority and responsibility with others;
- give important roles and responsibilities to others;
- tell people how to recognize problems or symptoms; and
- tell people how and where to get further information.

To communicate familiarity – deliver messages that:

- use analogies to make the unfamiliar familiar;
- have a strong visual content; and
- describe means for exploring issues in greater depth.

To communicate fairness – deliver messages that:

- acknowledge possible inequities;
- address inequities; and
- discuss options and trade-offs.

To communicate trust – deliver messages that:

- cite credible third parties;
- cite credible sources for further information;
- acknowledge that there are other points of view;
- indicate a willingness to be held accountable;
- describe achievements;
- indicate conformance with the highest professional, scientific and ethical standards;
- cite scientific research – be prepared to point to specific published studies;
- describe the review, approval and advisory processes;
- identify the partners working with you; and
- indicate your willingness to share the risk ("do unto others only that which you would be willing to do unto yourself or your loved ones").

BOX 6.4: EXAMPLES OF TOPIC-RELATED QUESTIONS TO ASK A REPORTER BEFORE A MEDIA INTERVIEW

Answers to the following topic-related questions can provide valuable information. However, time is seldom available, especially during an emergency, to ask them all. In addition, reporters may find some questions – particularly those marked below with an asterisk – offensive, insulting or inappropriate for a news source to ask. The following list should be reviewed and judgement exercised in selecting 3–4 questions appropriate to the situation, available time and specific reporter.

- What is the subject or topic of the interview?
- What is the focus of the interview?
- What specific subjects does the reporter expect to cover in the interview?
- What is the most important thing that the reporter would like to know? Would the reporter like to receive background material related to the topic before conducting the interview?
- Would the reporter like suggestions about who else to interview?
- If you are not the right person for the interview, would the reporter like suggestions about who would be better?
- What types of questions will be asked?*
- What specific questions will be asked?*
- Has the reporter done any background research related to the topic of the interview?*
- If so, what was found and where?*
- Who else has the reporter interviewed?*
- What did they say?*
- Who else does the reporter expect to interview for the story?*
- How will the reporter use the interview material?*
- How will the interview material fit into the story?*

BOX 6.5: EXAMPLES OF PROCEDURAL QUESTIONS TO ASK A REPORTER BEFORE A MEDIA INTERVIEW

Answers to procedural questions can provide valuable information. However, as with topic-related questions, time is seldom available (especially during an emergency) to ask them all. In addition, reporters may find some of the following questions – particularly those marked below with an asterisk (*) – offensive, insulting or inappropriate for a news source to ask. The following list should be reviewed and judgement exercised in selecting 3–4 questions appropriate to the situation, available time and the specific reporter.

Background questions

- Who will be conducting the interview?
- What is the reporter's name, media affiliation, telephone number, cell/mobile phone number, fax number and email address?
- Is the reporter a staff member (full-time or part-time) or a freelancer?
- Does the reporter specialize in any particular area?
- What type of publication or programme is it?
- When will the story be published or broadcast?
- Who generally reads, sees or hears the publication or programme?
- What stories have previously been covered by the reporter?*
- How long has the reporter been a journalist?*
- Will the reporter have any say in writing the headline or the lead for the story?*

Logistical questions

- What is the reporter's deadline for the story?
- Is the reporter's deadline flexible?
- Will it be possible for the interviewee to get back to the reporter to do the interview later?
- If so, when?
- Where will the interview take place?
- How long will the interview take?
- What is the format for the interview – for example, live, tape, sit-down, stand-up or panel?
- Can the interviewee use notes?
- Who else will be present at the interview?
- Will there be other reporters or guests?
- Will the interview be audio recorded or videotaped by the reporter?
- Where will the story appear (for example, will it be the lead story)?*
- Is the story likely to appear elsewhere?*
- If so, where?*
- How long will the story be?*
- How many seconds/words will be taken from the interview for the story?*
- Does the reporter call back to verify the accuracy of specific quotes attributed directly to the person being interviewed?*
- Will the person being interviewed be allowed to have an input regarding interview setting, such as seating arrangements?*
- If the interview will be audio recorded or videotaped by the reporter, can a copy be made available for archiving?*
- Will it be acceptable if the interviewee records the interview?*

STEP 7

Evaluate messages and performance

7.1: *Evaluate* message delivery and media coverage

BOXES 7.1–7.3 present a list of measures that can be used to evaluate the likely success or otherwise of message delivery in terms of:

- the openness and transparency of communications;
- the use of listening techniques; and
- message clarity.

BOX 7.4 presents process evaluation measures that can be used to evaluate activities aimed at achieving timely and accurate newspaper, radio, television and internet coverage during an emergency. These and other process measures (**BOX 7.5**) can also be adapted for evaluating other communication outlets such as traditional and folk media.

7.2: *Evaluate* and improve performance based on feedback

Performance improvement requires performance evaluation to help identify the gaps and deficiencies to be addressed and corrected. Based on the results of evaluation, changes can be made to ensure the achievement of goals and objectives. Evaluation is an ongoing and nearly continuous process aimed at improving all communication plans, strategies and messages based on feedback. Each of the seven steps summarized in this field guide can be subjected to evaluation, and the lessons learned from this can be applied to all communication activities, especially strategy and planning. All too often agencies and organizations fail to acknowledge and learn from their mistakes.

7.3: *Evaluate* public responses to messages

The most important thing to evaluate is the impact of the message on the target audience. For example, did the target audience hear, understand and act upon what was communicated to them? Examples of measures of outcome and change are shown in **BOX 7.6**. The overall intention of this type of evaluation is to gain information so that improvements can be made. Information is gathered and analysed to:

- improve current and future communication efforts;
- verify that change has occurred; and
- identify messages, activities or programmes that are working or not working.

BOX 7.1: EVALUATING OPENNESS AND TRANSPARENCY OF COMMUNICATIONS

- Were you candid and open with reporters?
- Were you the first to reveal bad news?
- If the answer to a question was unknown or uncertain, did you express willingness to get back to the reporter with a response within an agreed upon deadline (assuming the story was not reported in real time)?
- If you were in doubt, did you lean towards sharing more information not less?
- Were you especially careful when asked to speculate or answer “what if” questions, especially about worst-case scenarios?

Did you:

- disclose risk information as soon as possible (emphasizing appropriate reservations about reliability)?
- fill information vacuums?
- minimize or exaggerate the level of risk? Over reassure?
- make corrections quickly if errors were made?
- discuss data and information uncertainties, strengths and weaknesses – including those identified by other credible sources?
- identify worst-case estimates as such, and cite ranges of risk estimates when appropriate?
- tell the truth?

BOX 7.2: EVALUATING LISTENING**Did you:**

- target the right audience?
- miss listening to anybody important (stakeholders or partners)?
- avoid making assumptions about what viewers, listeners and readers knew, thought or wanted done about the risks or the situation?
- identify with the target audience and try empathetically to put yourself in their place?
- acknowledge the validity of people’s emotions and fears?
- respond (in words, gestures and actions) to emotions that people expressed, such as anxiety, fear, anger, outrage and helplessness?
- express genuine empathy when responding to questions about loss?
- acknowledge, and say, that any illness, injury or death is a tragedy?
- use media outlets that encourage listening, feedback, participation and dialogue?
- avoid distant, abstract and unfeeling language about harm, deaths, injuries and illnesses?
- recognize that competing agendas, symbolic meanings, and broader social, cultural, economic or political considerations often complicate the task of effective media communication?
- display sensitivity to local norms, such as in speech and dress?
- review available data and information on what people were thinking before media interviews?

Examples include data and information drawn from interviews, facilitated discussion groups, public meetings, public hearings, information exchanges, availability sessions, advisory groups, logs from hotlines or toll-free numbers, and surveys.

BOX 7.3: EVALUATING CLARITY**Did you:**

- speak at the appropriate level of comprehension for your target audience?
- keep your sentences short and focused?
- use clear, non-technical language?
- use graphics and visual aids to clarify messages?
- respect the unique media communication needs of special and diverse audiences?
- translate and test messages to meet the cultural and language needs of special populations?
- consider how best to express messages intended to have global reach?
- personalize risk data?
- use examples and anecdotes that made data come alive?
- acknowledge and respond to the distinctions that the public views as important in evaluating risks?
- use risk comparisons to help put risks in perspective, and avoid comparisons that ignored the distinctions people consider important?
- identify specific actions that people can take to protect themselves and to maintain control of the situation at hand?
- strive for brevity?
- offer to provide needed additional information within the reporter's deadline?
- provide the reporter with information about actions that were under way or that could be taken?
- promise only that which could be delivered and then follow through?

BOX 7.4: EVALUATION OF MEDIA COVERAGE**Newspapers**

- How many newspapers published or carried your information?
- How many published or carried the information of other organizations? Did the information reinforce your message or was it competitive?
- How prominent were the articles – front page; above the “fold”?
- Did the articles convey your messages without distortion?

Radio

- How many radio spots, news items or mentions resulted from your message?
- What were the audience ratings data?
- How many radio spots, news items or mentions resulted from the messages of other organizations? Did the information reinforce your messages or was it competitive?
- Were the radio spots transmitted at peak listening times?
- Were your remarks edited appropriately?
- Were you successful in getting across your key messages and “sound bites”?
- Were other organizations successful in getting across their key messages and “sound bites”?

Television

- How many television spots, news items or mentions resulted from your messages?
- What were the audience ratings data?
- How many television spots, news items or mentions resulted from the messages of other organizations?
- Were the television spots transmitted at peak listening time?
- Were you edited appropriately?
- Were you successful in getting across your key messages and “sound bites”?
- Were other organizations successful in getting across their key messages and “sound bites”? Did the information reinforce your message or was it competitive?

Internet

- How many visits (“hits”) did your organizational web site receive?
- Were your messages quoted or mentioned on the web sites of other organizations?
- Were the messages of individuals or organizations with an opposing viewpoint quoted or mentioned on the web sites of other organizations?
- Were you quoted or edited accurately and appropriately?
- Were you successful in getting across your key messages and “sound bites”?
- How many “counter sites” offered other or opposing viewpoints?
- Were other organizations successful in getting across their key messages and “sound bites”? Did the information reinforce your message or was it competitive?

BOX 7.5: EXAMPLES OF PROCESS EVALUATION MEASURES

- time schedules;
- expenditures;
- work performed;
- volume of enquiries from the public (for example, through analysis of telephone hotline call-in logs);
- fact sheets distributed; and
- participation by the target audience in communication activities (for example, the number of journalists who attended a media event).

BOX 7.6: EXAMPLES OF OUTCOME EVALUATION MEASURES

Changes in:

- knowledge;
- understanding;
- awareness;
- cooperation;
- support for policies or plans;
- attitudes;
- opinions;
- beliefs;
- intentions;
- behaviour;
- actions;
- decisions; and
- trust in health authorities.

ANNEX 1. PRINCIPLES AND TECHNIQUES OF EFFECTIVE MEDIA COMMUNICATION

Listed below is a brief summary of the principles and techniques of effective media communication. This summary is based upon a review of the scientific and practitioner literature. These principles and techniques are covered in the seven steps. They are repeated and summarized here for the convenience of the reader. More information on each principle and technique can be found in the WHO handbook.

I. Principles and techniques

1. Accept the media as a legitimate partner

- Recognize that effective media communication in an emergency or crisis:
 - enables the media to play a constructive role in protecting the public's health;
 - enables public health officials to reach a wide range of stakeholders; and
 - enables public health officials, in cooperation with the media, to build trust, calm a nervous public, provide needed information, encourage cooperative behaviours, and save lives.
- Demonstrate respect for the media by keeping them well informed of decisions and actions.
- Establish good working relationships with media contacts before an emergency arises.
- Include journalists in public emergency response planning exercises.
- Be polite and courteous at all times, even if the reporter is not.
- Avoid embarrassing reporters.
- Provide information for on-site reporters on the location of electrical outlets, public telephones, rest rooms, hotels, restaurants and other amenities.
- Avoid being defensive or argumentative during interviews.
- Include elements in interviews that make a story interesting to the media, including examples, stories and other aspects that influence public perceptions of risk, concern and outrage.
- Use a wide range of media communication channels to engage and involve people.
- Adhere to the highest ethical standards – recognize that people hold you professionally and ethically accountable.
- Strive to inform editors and reporters of agency preparedness for a public health emergency.
- Offer to follow-up on questions that cannot be addressed immediately.
- Strive for “win-win” media outcomes.
- Involve the media in training exercises and preparedness drills.

2. Plan thoroughly and carefully for all media interactions

- Assess the cultural diversity and socioeconomic level of the target populations.
- Assess internal media-relations capabilities.
- Recognize that all communication activities and materials should reflect the diverse nature of societies in a fair, representative and inclusive manner.
- Begin all communication planning efforts with clear and explicit goals – such as:
 - informing and educating;
 - improving knowledge and understanding;

- building, maintaining or restoring trust;
- guiding and encouraging appropriate attitudes, decisions, actions and behaviours; and
- encouraging dialogue, collaboration and cooperation.
- Develop a written communication plan.
- Develop a partner communication strategy.
- Establish coordination in situations involving multiple agencies.
- Identify important stakeholders and subgroups within the audience as targets for your messages.
- Prepare a limited number of key messages in advance of potential public health emergencies.
- Post the key messages and supporting information on your own well-publicized web site.
- Pre-test messages before using them during an interview.
- Respect diversity and multiculturalism while developing messages.
- Train key personnel – including technical staff – in basic, intermediate and advanced media communication skills.
- Practise media communication skills regularly.
- Never say anything “off-the-record” that you would not want to see quoted and attributed to you.
- Recruit media spokespersons who have effective presentation and personal interaction skills.
- Provide training for high-ranking government officials who play a major role in communication with the media.
- Provide well-developed talking points for those who play a leading role in communication with the media.
- Recognize and reward spokespersons who are successful in getting their key messages included in media stories.
- Anticipate questions and issues that might be raised during an interview.
- Train spokespersons in how to redirect an interview (or get it back on track) using bridging phrases such as “what is really important to know is...”.
- Agree with the reporter in advance on logistics and topic – for example, the length, location, and specific topic of the interview – but realize that the reporter may attempt to stray from the agreed topic.
- Make needed changes in strategy and messages based on monitoring activities, evaluation efforts and feedback.
- Work proactively to frame stories rather than waiting until others have defined the story and then reacting.
- Carefully evaluate media communication efforts and learn from mistakes.
- Share with others what you have learned from working with the media.

3. Meet the functional needs of the media

- Assess the needs of the media.
- Be accessible to reporters.
- Respect their deadlines.
- Accept that news reports will simplify and abbreviate your messages.
- Devise a schedule to brief the media regularly during an emergency, even if updates are not “newsworthy” by their standards – open and regular communication helps to build trust and fill information voids.
- Refer journalists to your web site for further information.
- Share a limited number of key messages for media interviews.
- Repeat your key messages several times during news conferences and media interviews.

- Provide accurate, appropriate and useful information tailored to the needs of each type of media, such as sound bites, background videotape, and other visual materials for television.
- Provide background material for reporters on basic and complex issues on your web site and as part of media information packets and kits.
- Be careful when providing numbers to reporters – these can easily be misinterpreted or misunderstood.
- Stick to the agreed topic during the interview – do not digress.
- If you do not know the answer to a question, focus on what you do know, tell the reporter what actions you will take to get an answer, and follow up in a timely manner.
- If asked for information that is the responsibility of another individual or organization, refer the reporter to that individual or organization.
- Offer reporters the opportunity to do follow-up interviews with subject-matter experts.
- Strive for brevity, but respect the reporter's desire for information.
- Hold media availability sessions where partners in the response effort are available for questioning in one place at one time.
- Remember that it benefits the reporter and the agency when a story is accurate.
- Before an emergency occurs, meet with editors and with reporters who would cover the story.
- Work to establish durable relationships with reporters and editors.
- Promise only that which can be delivered, then follow through.

4. Be candid and open with reporters

- Be first to share bad news about an issue or your organization, but be sure to put it into context.
- If the answer to a question is unknown or uncertain, and if the reporter is not reporting in real time, express a willingness to get back to the reporter with a response by an agreed deadline.
- Be first and proactive in disclosing information about an emergency, emphasizing appropriate reservations about data and information reliability.
- Recognize that most journalists maintain a “healthy scepticism” of sources, and trust by the media is earned – do not ask to be trusted.
- Ask the reporter to restate a question if you do not understand it.
- Hold frequent media events to fill information voids.
- Do not minimize or exaggerate the level of risk.
- Acknowledge uncertainty.
- Be careful about comparing the risk of one event to another.
- Do not offer unreasonable reassurances (i.e. unwarranted by the available information).
- Make corrections quickly if errors are made or if the facts change.
- Discuss data and information uncertainties, strengths and weaknesses – including those identified by other credible sources.
- Cite ranges of risk estimates when appropriate.
- Support your messages with case studies and data.
- If credible authorities disagree on the best course of action, be prepared to disclose the rationale for those disagreements, and why your agency has decided to take one particular course of action over another.
- Be especially careful when asked to speculate or answer extreme or baseless “what if” questions, especially on worst-case scenarios.
- Avoid speaking in absolutes.
- Tell the truth.

5. Listen to the target audience

- Do not make assumptions about what viewers, listeners and readers know, think or want done about risks.
- If time and resources allow, prior to a media interview, review the available data and information on public perceptions, attitudes, opinions, beliefs and likely responses regarding an event or risk. Such information may have been obtained through interviews, facilitated discussion groups, information exchanges, expert availability sessions, public hearings, advisory group meetings, hotline call-in logs, and surveys.
- Monitor and analyse information about the event appearing in media outlets, including the internet.
- Identify with the target audience of the media interview, and present information in a format that aids understanding and helps people to act accordingly.
- During interviews and news conferences, acknowledge the validity of people's emotions and fears.
- Be empathetic.
- Target media channels that encourage listening, feedback, participation and dialogue.
- Recognize that competing agendas, symbolic meanings, and broader social, cultural, economic or political considerations often complicate the task of effective media communication.
- Recognize that although public health officials may speak in terms of controlling "morbidity and mortality" rates, more important issues for some audiences may be whether people are being treated fairly in terms of access to care and medical resources.

6. Coordinate, collaborate and act in partnership with other credible sources

- Develop procedures for coordinating the activities of media spokespersons from multiple agencies and organizations.
- Establish links to the web sites of partner organizations.
- Recognize that every organization has its own culture and this culture impacts upon how and what it tries to communicate.
- To the extent possible, act in partnership with other organizations in preparing messages in advance of potential emergencies.
- Share and coordinate messages with partner organizations prior to media interviews or news conferences.
- Encourage partner organizations to repeat or echo the same key messages – such repetition and echoing by many voices helps to reinforce the key messages for target audiences.
- In situations involving multiple agencies, determine information clearance and approval procedures in advance when possible.
- Aim for consistency of key messages across agencies – if real differences in opinion do exist be inclined to disclose the areas of disagreement and explain why your agency is choosing one course of action over another.
- Develop a contingency plan for when partners cannot engage in consistent messaging – be prepared to make an extra effort to listen to their concerns, understand their point of view, negotiate differences, and apply pressure if required and appropriate.
- Devote effort and resources to building bridges, partnerships and alliances with other organizations (including potential or established critics) before an emergency occurs.
- Consult with internal and external partners to determine which organization should take the lead in responding to media enquiries, and document the agreements reached.
- Discuss ownership of specific topics or issues in advance to avoid one partner treading upon the perceived territory of another.

- Identify credible and authoritative sources of information that can be used to support messages in potential emergencies.
- Develop a plan for using information from other organizations in potential emergencies.
- Develop contact lists of external subject-matter experts able and willing to speak to the media on issues associated with potential emergencies.
- Cite as part of your message credible and authoritative sources that believe what you believe.
- Issue media communications together with, or through, individuals or organizations believed to be credible and trustworthy by the target audience.

7. Speak clearly and with compassion

- Be aware that people want to know that you care before they care what you know.
- Use clear, non-technical language.
- Explain medical or technical terms in clear language when they are used.
- Use graphics or other pictorial material to clarify and strengthen messages.
- Respect the unique information needs of special and diverse audiences.
- Express genuine empathy when responding to questions about loss – acknowledge the tragedy of illness, injury or death.
- Personalize risk data by using stories, narratives, examples and anecdotes that make technical data easier to understand.
- Avoid distant, abstract and unfeeling language about harm, deaths, injuries and illnesses.
- Acknowledge and respond (in words, gestures and actions) to the emotions people express, such as anxiety, fear, worry, anger, outrage and helplessness.
- Acknowledge and respond to the distinctions people view as important in evaluating risks, such as perceived benefits, control, fairness, dread, whether the risk is natural or man-made, and effects on children.
- Be careful to use risk comparisons only to help put risks in perspective and context, and not to suggest that one risk is like another – avoid comparisons that trivialize the problem, that attempt to minimize anxiety, or that appear to be trying to settle the question of whether a risk is acceptable.
- Give people a sense of control by identifying specific actions they can take to protect themselves.
- Identify significant misinformation, being aware that repeating it may give it unwanted attention.
- Recognize that saying “no comment” without explanation or qualification is often perceived as guilt or hiding something – consider saying instead “I wish I could answer that. However...”.
- Be sensitive to local norms, such as those relating to speech and dress.
- Always try to include in a media interview a discussion of actions under way by the agency, or actions that can be taken by the public.

