Summary report on the

Regional consultation on risk communication

Hammamat, Tunisia
18–20 September 2012

World Health Organization

Regional Office for the Eastern Mediterranean

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1. Introduction

The WHO Regional Office for the Eastern Mediterranean held a regional consultation on risk communication on 18–20 September in Hammamet, Tunisia. The meeting was attended by 46 experts and focal points on risk communication from countries of the WHO Eastern Mediterranean Region and from different sectors and organizations including crisis management centres, ministries of health and academic institutions. Also in attendance were WHO staff from the Regional Office and selected country offices. The objectives of the meeting were to:

- Clarify and better understand the concepts related to risk communication;
- Share experiences among the participants;
- Agree on a strategic framework for risk communication; and
- Set key regional directions for strengthening risk communication.

The consultation was opened by Dr Ann Lise Guisset, Acting WHO Representative for Tunisia, who delivered a message from Dr Ala Alwan, WHO Regional Director for the Eastern Mediterranean. In his message Dr Alwan noted that despite the key role of risk communication in saving lives, it had been neglected in the Region. Risk communication should be part of any emergency preparedness plan. However, the results of a preliminary capacity assessments conducted in selected countries within the context of the International Health Regulations had shown a real gap in systems and infrastructure, organizational structure and human resources. These could only be addressed if there was a set of agreed minimum requirements for risk communication.

The consultation made use of plenary sessions, panel discussions and group work in which the participants' expertise and experiences were shared. Participants engaged in active discussions that resulted in the development of conceptual strategic framework for the Region (based on one developed by the WHO Regional Offices for South-East Asia and the

Western Pacific under the Asia Pacific Strategy for Emerging Diseases), a definition of risk communication, a time-line for implementation and recommendations for Member States and WHO. It was decided that this work would continue with a task force made up of WHO and country representatives to finalize the meeting outcomes and to further develop a regional strategy for building risk communication capacity.

2. Summary of discussions

Key messages

- Communication complex refers to an approach that rests on a premise that most problems are created by how we interact with each other thus most of our solutions arise from the same process. A growing body of theory and research about communication tells us that we live in communication, that it reflexively creates us as we create it. It is from this understanding that a conceptual understanding of risk communication was discussed and developed. When we deal with risk or crisis or engage in behaviour change, we are trying to influence how people think about things and therefore act. Research has shown that how we communicate impacts on brain function. It does not change our genes, but it does change how our genes function. Given this fact, communication also has direct impact on health promotion and addressing illness.
- The implication for risk communication is that there should be a greater use of networking and collaboration in planning and execution of strategy. Given the complexity of communication, communication should not be an afterthought, but it should be an integral piece of health delivery. This is a transformative way of thinking about communication and the delivery of health.
- The risk management process encourages the involvement of stakeholders, which includes the public, so they may engage in dialogue to find what works or doesn't work. As the world is

changing with the increasing channels of communication, it is imperative that we update our skills and processes of how we communicate with others. Professionals working in risk communication who have adopted a complex perspective are continually improving their communication skills and learning how to effectively use the tools available to them.

- From this theoretical approach, risk communication is critical to the risk management process and communication issues should be considered and managed throughout the process.
- The difference between crisis communication and risk communication, risk communication is about knowing how to respond and crisis communication is how we respond when an event is happening.
- There remains some confusion between crisis communication, risk communication and preparedness. Further work in this area will help countries of the Region develop their understanding more clearly.
- Participants agreed the consultation was an important initiative in generating a much-needed focus on risk communication and IHR. Much more work will need to be done, but the strategic direction is set for the Region to move towards this goal.
- There appears to be a wealth of data available about public health crises in the Region that could serve as a basis for formulating and evaluating a risk communication plan. Lessons learnt and past events are worthy of serious reflection and thought to build an effective risk communication plan. What was clear from the lessons learnt is that this is the time to forge relationships and put in place a structure (functions, networks, policies, and guidelines). Developing relationships and designing operating procedures during a public health emergency is not the best time, as the emergency presents its own challenges.

Definition of risk communication capacity under IHR

Participants agreed on the need for a common working definition for risk communication and proposed the following definition.

> Risk communication in public health emergencies is the ability of national health stakeholders to apply communication effectively to better detect, assess, inform and respond to public health crises to protect health and to limit loss of life or deterioration of the quality of life of affected populations.

Proposed regional strategy for 2015

Overall goal: Contribute to the reduction of mortality and morbidity and limit the disruptions associated with public health emergencies.

Objective: Strengthen the effectiveness of communicating about risks before, during and after health emergencies through systematic and structured application of communication which supports: 1) detection; 2) assessment; 3) informing; and 4) responding to public health emergencies.

Specific objectives: Establish minimum capacities to implement effective risk communication, which include:

1. A strategic framework for risk communication in public health emergencies;
2. A description of core functions at different levels of national systems; and
3. A plan to build the required capacities in Member States and for different health emergencies

Guiding principles of the strategy are as follows.

- Risk communication is about information exchange beyond message transmission
- Risk communication is essential all through preparedness up to the recovery phases
- Multisectoral collaboration is a prerequisite
- Empowerment of individuals and communities is necessary for optimum participation
- Effective interpersonal relationship is crucial for risk communication.

Follow-on actions from the consultation

Participants volunteered to take part in a taskforce to finalize the conceptual framework and the plan of action from the meeting. The final document from this group will serve as the basis of dialogue between the Regional Office and Member States to work together to strengthen their relationships and develop a risk communication plan that is reflective of the context of the Region. Certain key tasks were agreed.

- The Regional Office to confirm composition of the task force.
- The Regional Office to set up an online review process.
- Revise the draft framework for risk communication.
- Indiana University to finalize the tool to assess risk communication capacity based on additional recommendation received at the meeting.
- The Regional Office and countries to implement the assessment survey in all countries of the Region.

3. Recommendations

To Member States

1. Establish a risk communication committee within the Ministry of Health that includes members from concerned departments such as

emergency and preparedness, communication and health promotion, with clear terms of reference and mechanism of work internally and externally with concerned partners.

2. Review the current risk communication situation in coordination with different sectors and adapt the framework and strategic plan nationally with country-specific goals and objectives.

3. Advocate for the importance of risk communication inside the Ministry of Health and with other sectors and stakeholders.

4. Integrate risk communication within the existing emergency response structure.

5. Develop a plan to build risk communication capacities and ensure allocation of necessary funds in order to implement the plan.

To WHO

6. Develop a regional taskforce from WHO headquarters and Regional Office and Member States to finalize the strategic framework.

7. Provide technical support to countries in the area of risk communication, including in mapping of capacities, development of plans of action and adoption of advocacy materials, giving priority to countries that are experiencing a crisis or are at risk.

8. Develop a mechanism for monitoring and evaluation of risk communication capacities in countries.

9. Advocate with ministries of health and other stakeholders about the importance of risk communication for health protection.

10. Develop resource materials for risk communication and support training for trainers and cascade training on risk communication.

11. Conduct workshops on making optimal use of social media for risk communication.

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