Risk Communication practice and perspective in contrast to WHO outbreak communication guidelines Thomas Abraham

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Until the SARS epidemic of 2003, the use of communication as a public health tool to fight the sudden onslaught of a new infectious disease had been little studied. During SARS, the importance of effective communication policies and tools became apparent. Countries that had the means and ability to provide credible information rapidly to their publics found it easier to contain the epidemic than countries where communication was slow and ineffective. A lack of information to the public allowed the disease to spread rapidly, while where people were given information on what to do to protect themselves, the impact of the epidemic was lessened.

Post SARS, the WHO and other organizations charged with public health in different parts of the world began to focus on the task of refining emergency risk communication strategies and principles. At the global level, the World Health Organization set out some of the principles and best practices upon which to base communication during outbreaks (WHO 2005). Moreover, national organizations such as the US Centers for Disease Control and Prevention (US CDC) have further elaborated these principles and developed training tools for emergency risk communication.

Based on the experience of communication during SARS, as well as earlier infectious diseases such as Nipah and Ebola, the WHO identified five critical best practices for effective outbreak communication. These are: building trust, announcing early, being transparent, respecting public concerns, and planning in advance. Of these, public trust in authorities is the seen as a crucial factor in effective communication. If the public trust the authorities they are more likely to take on board risk messages coming from the government. If on the other hand, there are doubts about the government's competence, or honesty, then messages put out by the government could be disregarded.

The experience of the H5N1 avian influenza outbreaks as well as the 2009 H1N1 pandemic revealed issues that the outbreak communication guidelines did not fully cover. Prominent among these were: communicating in the internet age, as well as the political, social and economic environment of risk communication.