Emerging Infectious Diseases: Challenges & Strategies for Public Health Responders

Daniel Barnett, MD, MPH
Associate Professor
Department of Environmental Health & Engineering
Department of Health Policy and Management (joint)
Johns Hopkins Bloomberg School of Public Health
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Principles of Public Health
Crisis Risk Communication in Emerging Infectious Disease Contexts

<table>
<thead>
<tr>
<th>Is it Flu or Ebola?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Flu (influenza)</strong></td>
</tr>
<tr>
<td>The flu is a common contagious respiratory illness caused by flu viruses. The flu is different from a cold. Flu can cause mild to severe illness, and complications can lead to death.</td>
</tr>
</tbody>
</table>

| **Ebola** |
| Ebola is a rare and deadly disease caused by infection with an Ebola virus. Ebola viruses are found in several African countries. Sporadic outbreaks have occurred in some African countries since 1976. |

| **How Flu Germs Are Spread** |
| The flu is spread mainly by droplets made when people who have flu cough or sneeze. People with flu can also spread the virus to surfaces, but this is less common. People with flu can spread the virus before and during their illness. |

| **How Ebola Germs are Spread** |
| Ebola can only be spread by direct contact with blood or body fluids from a person sick with Ebola. Objects like needles that have been in contact with the blood or body fluids of a person sick with Ebola. Ebola cannot spread in the air or by water or food. |

| **Who Gets The Flu?** |
| Anyone can get the flu. Some people—like very young children, older adults, and people with some health conditions—are at high risk of serious complications. |

| **Who Gets Ebola?** |
| People most at risk of getting Ebola are: |
| - Healthcare providers taking care of patients with Ebola. |
| - Friends and family who have had unprotected direct contact with blood or body fluids of a person sick with Ebola. |

| **Signs and Symptoms of Flu** |
| The signs and symptoms of flu usually develop within 2 days after exposure. Symptoms come on quickly and are usually mild. |

| **Signs and Symptoms of Ebola** |
| The signs and symptoms of Ebola can appear 2 to 21 days after exposure. The average time is 8 to 10 days. Symptoms of Ebola develop over several days and become progressively more severe. |

| Flu (influenza) |
| - Fever or feeling feverish |
| - Headache |
| - Muscle or body aches |
| - Feeling very tired (fatigue) |
| - Cough |
| - Sore throat |
| - Runny or stuffy nose |

| Ebola |
| - Fever |
| - Severe headache |
| - Muscle pain |
| - Feeling very tired (fatigue) |
| - Vomiting and diarrhea develop after 3–6 days |
| - Weakness (can be severe) |

Pregnant?
Warnings: Zika might be linked to birth defects. There is no vaccine to prevent Zika virus infection.

Protect yourself from mosquito bites:
- Use insect repellent. |
- Wear long-sleeved shirts and long pants. |
- Stay indoors, especially from dawn to dusk. |
- Use bed nets. |
- Avoid standing water.
What is risk communication?

- A two-way activity
- Based on mutual respect and trust
What is the goal of risk communication during a crisis?

We want the public to be:

• informed
• concerned
• aware
• calm
Risk Communication Theory

• Based on four models:
  – Risk perception
  – Mental noise
  – Trust determination
  – Negative dominance
Risk Perception

Key Principle:

*Perception* of risk is often very different than *actual* risk.
Risk Perception

Risk perception = Actual risk + Outrage (Fear)

Numbers or statistics are often the least important factor in determining risk
Question: Is it safer to fly or to drive?
Risk Perception

- Risk **More** Acceptable
  - Voluntary
  - Have control
  - Benefit
  - Natural
  - Familiar
  - Statistical
  - Affect adults

- Risk **Less** Acceptable
  - Involuntary
  - No control
  - No benefit
  - Manmade
  - Exotic
  - Catastrophic
  - Affect children
Risk Perception

• Why is it important to understand?
• Because we can use this understanding to influence the public’s risk perception and bring their *perception* of the risk closer to the *actual* risk.
We can present the image that we are:

- Genuinely concerned about the public’s safety.
- Calm, polite, and helpful.
- Sharing all information with the public.
- Knowledgeable and in control of the situation.
- Providing useful information.
- Taking all steps necessary to protect the public’s health.
Negative Dominance

• When people process information, negative messages have greater influence.
• Counter-balance negative messages by a larger number of positive or solution-oriented messages.
• Focus on what is being done rather than what is not being done.
Negative Dominance

• It’s OK to acknowledge uncertainty, but frame it in a positive way:
  – We’re collecting that information right now
  – I’ll check on that and get back to you
• Assure them that additional info will be announced as soon as it becomes available.
• Repeat what is already being done to get control of the situation.
During Communication

• Make sure your message is accurate
• Consider what outside influences are affecting your message
• Make sure your message gives useful information
• Make sure your message makes sense
• Avoid unintended meanings
Before Communication Begins

• Identify key audiences
  – Health care workers
  – Media
  – Other agencies
  – General public
  – Individual patients
Before Communication Begins

• Think about cultural competency
  – Language
  – Customs
  – Taboos
  – Myths
Trust Determination

Develop trust and credibility
• Earn their trust
  – Use appropriate body language
    • Lean forward, listen intently, look at camera as if it were a person, maintain eye contact
  – Express genuine concern
  – Connect with audience as people
During Communication: *Interview “Don’ts”*

• Lie or try to cloud the truth
• Improvise or dwell on negative allegations
• Raise issues you don’t want to see in the story
• Fail to think it through in advance
• Guess
• Speculate, discuss hypothetical situations
• Say “No comment.”

*Source: ASTHO*
Mental Noise

• When people are upset they have difficulty hearing, understanding, and remembering.
During Communication

• Be clear
  – Avoid jargon
  – Make your ideas flow logically
    • Time sequence
    • High to low priority

• Be Concise
  – Answers should be < 2 minutes long

• Don’t be afraid to repeat yourself
  – Try saying the same thing in a different way, but keep the message consistent
During Communication

• Let people know what they can do
• Let people know how to get more info
  – Refer to a hotline
  – Refer to a website
  – “Stay tuned to your radio or TV. We’ll provide more information as it becomes available.”
• Provide written info if possible
Plan Your Message

• Ask yourself and others “What are people really concerned about?”
• Start with 3 key points to address these concerns
• Back up each key point with one or two facts
• Consider drafting “message maps”

Source: ASTHO
What Is a *Message Map*?

• Tool that can help you **plan** and **practice** risk communication messages
• Helps to address **mental noise**
• Helps to **organize complex information**
• Makes it **easier to express current knowledge**
Components of a Message Map

• **Limit** of 3 key messages
• **Maximum** of 3 supporting statements per key message!

*Source: ASTHO*
**How contagious is smallpox?**

<table>
<thead>
<tr>
<th>Key Message Fact 1</th>
<th>Key Message Fact 2</th>
<th>Key Message Fact 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Smallpox spreads slowly compared to measles or the flu</strong></td>
<td>This allows time for us to trace contacts and vaccinate those people who have come in contact.</td>
<td>Vaccination within 3 to 4 days of contact will generally prevent the disease</td>
</tr>
<tr>
<td>Supporting Fact 1-1</td>
<td>Supporting Fact 2-1</td>
<td>Supporting Fact 3-1</td>
</tr>
<tr>
<td>People are only infectious when the rash appears and they are ill</td>
<td>The incubation period for the disease is 10-14 days</td>
<td>People who have never been vaccinated are the most important ones to vaccinate</td>
</tr>
<tr>
<td>Supporting Fact 1-2</td>
<td>Supporting Fact 2-2</td>
<td>Supporting Fact 3-2</td>
</tr>
<tr>
<td>It requires hours of face-to-face contact</td>
<td>Resources for finding people are available.</td>
<td>Adults who were vaccinated as children may still have some immunity to smallpox</td>
</tr>
<tr>
<td>Supporting Fact 1-3</td>
<td>Supporting Fact 2-3</td>
<td>Supporting Fact 3-3</td>
</tr>
<tr>
<td>There are no asymptomatic carriers</td>
<td>Finding people who have been exposed and vaccinating them is the successful approach</td>
<td>Adequate vaccine is on-hand and the supply is increasing</td>
</tr>
</tbody>
</table>
In Summary

• Have your tools ready.
• Remember that risk perceptions can be influenced in positive ways.
• Focus on positive, solution-oriented messages.
• Trust and credibility are paramount to successful risk communication.
• Let people know what they can do, including where to get more info.
“MINI-DISCUSSION” SCENARIO
Zika Outbreak in Utah

• A Zika outbreak is reported among 35 residents of your community who have returned from travel to affected areas of the Caribbean and South America.

• Local and national media descend upon your community to interview anyone who will be willing to speak on camera to discuss Zika and its potential impacts on your community, the State of Utah, the U.S., and the global community.
Questions for Discussion

• What role(s) might you play in responding to this event?

• What are potential strategies/approaches for your agency’s communication of risk in light of the circumstances?
Message Mapping Risk Communication Exercise
Message Mapping Risk Communication Exercise

• Based on Utah Zika outbreak scenario presented in previous slide content above:
  – Divide into small groups
  – Select a likely question that you and/or your agency would be asked about the Zika outbreak in Utah.
  – Prepare a message map using the template provided in response to the Utah Zika outbreak-related question that your small group selects.
    • Each group should have a “scribe” to write down your respective group’s message map content
    • Each group should have a “rapporteur” who will share your message map contents with the larger group
Thank You

Questions?

dbarnet4@jhu.edu
410-502-0591