



**The Central American Risk  
And Outbreak Communication for  
Avian Influenza and Pandemic Preparedness**

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## Executive Summary

Communication before, during and after avian/pandemic influenza is a crucial component in managing the crisis. Varied publics in need of rapid responses, officials across agencies and the media all require targeted communication. Stability and sustainability depend on a government's ability to react transparently. However, much of what is needed to prepare for a pandemic is counter-intuitive for leaders and communicators. Communication training, therefore, is part of the preparedness strategy of the Pan American Health Organization (PAHO) and includes key aspects of WHO's Outbreak Communication Guidelines as well as ways of ensuring that avenues of communication are set up within countries and the Region. **The Central American Risk and Outbreak Communication for Avian Influenza and Pandemic Preparedness Workshop** was held in Guatemala City, Guatemala, 7-9 November 2006. Thirty-nine professional communicators participated from Guatemala, El Salvador, Costa Rica, Honduras, Nicaragua and Panama. Adapted from a concept developed by the U.S. Centers for Disease Control and Prevention, the workshop brought together high-ranking communication specialists representing the ministries of health, agriculture, education, as well as civil defense, foreign affairs, and social security. Representatives also attended from the FAO, OIRSA and the UNDP. Funding was provided by USAID and the CDC. For many of the participants this was a follow up to workshops held in 2006 to enhance pandemic preparation, prevention, response and recovery skills for communicators.

**Goals:** The three-day workshop set out to develop or enhance risk and outbreak communication skills and assist in managing avian influenza and a possible influenza pandemic; ensure that communication plans exist within the National Influenza Preparedness and Prevention Plans for communicating to varied publics as well as among government agencies, and design messages that resonate among various audiences, especially the most vulnerable and hard to reach.

**Methodology:** The workshop began with opening remarks from Mario Gudiel of the Guatemalan ministry of health; Joaquin Molina, PAHO's representative in Guatemala, and Hernan Delgado, director of the Institute of Nutrition of Central America and Panama (INCAP), a PAHO center which was the venue for the three days of sessions. To set the context, technical experts presented current information on the science and case rates surrounding avian/pandemic influenza. The presentation included explanations about spread and mutation, probability of a pandemic, the transmission of avian influenza, precautions and the important distinctions between seasonal influenza, avian influenza and pandemic influenza. Widespread confusion among the media and the general public about terminology and definition requires extra effort among government communicators. The manager of PAHO's disaster preparedness area, Jean Luc Poncelet, spoke about the need for a coordinated response to a pandemic, using the basic infrastructure and mechanisms designed for disaster management.

The workshop was divided into two parts: advanced training in risk and outbreak communication skills and communication planning and preparation. In September 2005, PAHO presented to its governing bodies a draft strategy and preparedness document that called on all the countries to create communication strategies and plans. All of the countries that attended the Guatemala workshop have communication plans, which are flexible and subject to ongoing change.

For the first day and a half, Dr. Jody Lanard, a leading risk communication expert, guided the group through a series of exercises, combining anecdotes, practical guidance and theory. Her work is based around WHO's Outbreak Communication Guidelines, a world renowned set of instructions she helped develop in 2003. The basic principles of Outbreak Communication call on governments to main trust and credibility, announce information early, transparency in decision making, inclusion of the public in planning, and the need to plan in advance. Crises create havoc all too often in the absence of these evidence-based guidelines, which are seen as counter-intuitive because they stress openness even when the entire picture is not known and acknowledging doubt. Current risk communication is conceptualized as a dialogue where the public's knowledge, attitudes and beliefs about a specific issue are heard, taken into account and addressed.

The workshop enabled country participants from various agencies within each country to work together in teams, often for the first time. In most countries in the region the national pandemic plans are a product of the ministries of health, and the challenge is to for the other government agencies to feel buy-in and support for coordinated responses.

Lanard introduced the participants to a series of skills to be used before and during crises. Among her messages: don't over-reassure, acknowledge uncertainty, legitimize people's fears, tolerate early over-reactions, offer people things to do, aim for total candor and speculate responsibly. Lanard also covered phrasing for dealing with doubt or uncertainty while maintaining transparency, which included advice to "err on the alarming side," pointing out that the ease of explaining a situation is better than previously thought rather than worse. Her group exercises set up ways to put the skills to use, including one entitled "Ten minutes in the taxi with the minister," and another that dealt with creating messages based on a Phase 5 scenario.

The second segment of the workshop, handled by health communicator Jennie Vasquez-Solis, opened with 20-minute presentations of country communication plans. All six countries presented their communication plans, outlining target audiences, objectives, channels, and activities. The details of the plans highlighted the enormous progress made since February 2006, when communication was included in PAHO's first USAID-sponsored workshop on avian/pandemic influenza in Panama. The session also showed some gaps in the ability to turn plans into action.

To set the scene for confronting a pandemic, Ms. Vasquez conducted a group exercise called: “The Pandemic Arrives.” Posing a series of questions, Ms. Vasquez asked participants to conceptualize what would happen during the first few days and weeks of an influenza pandemic. She asked them to describe what would happen in broad terms with patients, their families, their ministries. Individuals wrote their responses on six flip charts. The reactions included emotions such as fear and violence, school closings, collapsed services, new diseases, demand for news, crashed economies and common graves, among a long list of comments. The exercise allowed the participants to then move ahead to design how they would put their country plans into operation during and in preparation for a pandemic. Among the participant responses in general:

- Involve the media early and create a culture of prevention and not reaction.
- Include all the countries in Central America in the communication planning.
- Expand communication groups to all government agencies.
- Replicate the national plans on local levels.
- Set up risk communication training for officials.
- Develop workshops to deal with pandemic scenarios.
- Ensure the public is adequately informed before a pandemic.
- Reconsider ways to reach isolated communities.

There also were discussions on messages, selecting spokespersons, training, materials and working with the media during crises. Ms. Vasquez emphasized that communicating during a crisis required preparation and coordination.

In a session geared toward providing ongoing communication work and follow up, the participants prepared action plans – both individually and for their countries. Individual plans included training, sharing information, production of materials, coordination among agencies, workshops, simulations and updating media contacts. Among the country activities suggested, Costa Rica planned to hold a workshop for journalists, El Salvador intended to broaden participation in its planning group, Guatemala’s plan included a strategy for distribution of materials and training, and Honduras said it would hold workshops geared toward prevention. Nicaragua’s plan included mobilization of resources, and Panama said it would strengthen its training and communication plans. Individual actions plans highlighted training, coordination, resource mobilization, messaging and evaluation.

**Outcomes and Findings:** The following is based on evaluations, action plans and comments.

- All of the countries have communication plans for an influenza pandemic but vary in terms of the ability to translate intentions into action.
- There has been widespread use of the PAHO-developed guidelines for creating a communication strategy, based on comments and inclusions in the plans.
- Simulation-style exercises create the environment for putting plans into action.
- The communication specialists from the varied ministries should be stimulated to work together to meet ongoing health challenges and included in future exercises and trainings.
- Communication teams recognized the need to expand past health to include tourism and industry.
- Risk and outbreak communication skills resonate with the communicators, who in turn need to share the information with their ministers.
- Spokespersons throughout the Region need training in risk and outbreak communication.
- Media training remains important but public officials need to understand local and rural media channels, such as radio and increasingly the Internet.
- Communication plans at the national levels must be flexible and transferred to the local and municipal levels.
- The overwhelming majority of participants said they would change their communication plans as a result of lessons learned during the workshop.

Next Steps:

- Follow up with the countries to promote inter-agency cooperation.
- Put communicators on electronic list to share materials and information.
- Encourage further development of communication plans.
- Maintain contact with communicators so that lessons learned can be shared.
- Follow up within six months with each of the communicators to gauge the status of their outbreak training, their national plans, and their ability to work toward local level implantation.