Crisis and Emergency Risk Communication: Tools you can use

Tribal Public Health Emergency Preparedness Workshop
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ACUTE AND COMMUNICABLE DISEASE | HEALTH SECURITY PREPAREDNESS AND RESPONSE
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Session overview

- CDC Crisis and Emergency Risk Communication

- Oregon Health Authority Crisis and Emergency Risk Communication Toolkits

- Community-based Methods

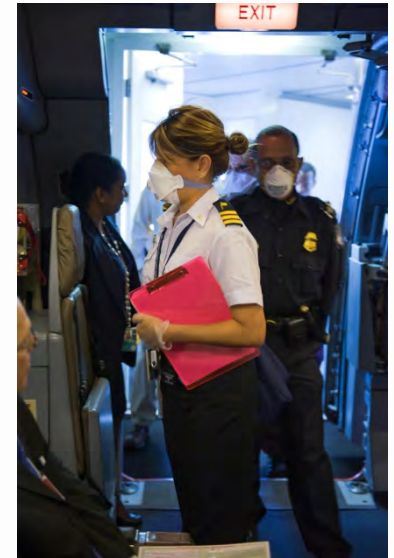   - Participatory Learning and Action (PLA)

    - Care groups

CDC Tools

Principle 1: Be first

- Crises are time-sensitive.
- The first sense of information is often preferred.

Principle 2: Be right

- Accuracy establishes credibility.
- Information should include what is known, what is not known, and what is being done to fill in the gaps.

Principle 3: Be credible

- Honesty should not be compromised.

Principle 4: Express empathy

- Suffering should be acknowledged in words.
- Build trust and rapport.

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Principle 5: Promote action

Giving people meaningful things to do:

- Calms anxiety.
- Promotes a restored sense of control.

Principle 6: Show respect

- Important when people feel vulnerable.
- Promotes cooperation and rapport.

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Tools

- Manual
- Training
  - Online
  - In-person

- Templates and tools
  - CERC Assessment Tool
  - Immediate Response Checklist
  - Anticipated Questions Tool
  - Message Development Worksheet
  - CERC Rubric
  - Wallet Cards

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CDC CERC Tools

www.emergency.cdc.gov/cerc

Oregon Health Authority CERC Toolkits

OHA CERC Toolkits: Topics

Current

- Extreme Heat
- Flooding
- Hepatitis A
- Meningococcal Disease
- POD and Vaccine Clinic Resources
- Seasonal Influenza
- Wildfire Smoke
- Winter Weather

Coming by end of June

- Contact Airborne
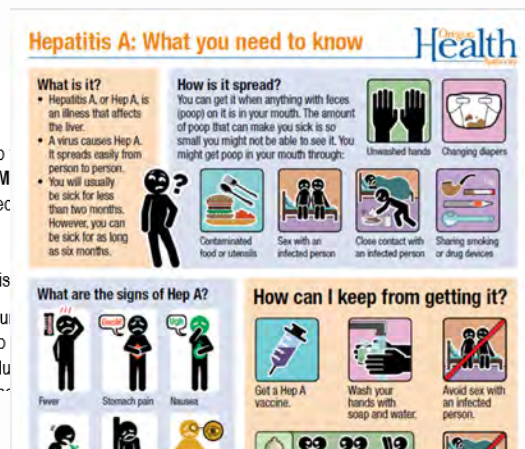- Contact Droplet
- Fecal-oral

OHA CERC Toolkits: Contents

- Fact Sheets
- Frequently Asked Questions (FAQs)
- Social media messages and videos
- Talking points
- Sample press releases

Also
- Bookmarks
- Vaccine reminder cards
- Public service announcements
- Infographics

FACT SHEET
Caring for Your Vulnerable Patients During a Heat Wave

Talking to patients during routine visits about how they can prevent heat-related illness can go a long way toward avoiding such illnesses. Simple steps can make a big difference, particularly for high-risk patients. These steps include encouraging patients to:

- Stay cool.
- Stay hydrated.
- Stay informed.

Here are some simple steps you can take to help your high-risk patients:

- Help patients identify cool air-conditioned public places they can go to when their home gets too hot.
- Tell patients that fans should not be relied on to keep them cool once the temperatures are above 90°F.
- Make sure patients know they should drink water before they become thirsty. Provide extra guidance if their medications or condition will affect how they stay hydrated.

healthoregon.org/cerc

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FACT SHEET
Hazy, smoky air: Do you know what to do?

- **Limit your exposure to wildfire smoke.**

- **Reduce time spent outdoors.**
  This can usually provide some protection, especially in a tightly closed, air-conditioned house. Set your A/C to recycle or recirculate, when at home or in your car, to limit your exposure.

- **Reduce time you e**
  It can be an importan
  in. It can minimize he

- **Stay hydrated. Drin**

- **Reduce other sourc**
  These can be burning
  furnaces, and vacuu

- **Check current air q**
  Go to http://oregonsn

- **If you have heart or**
  your health care prov

Wildfire Smoke and Your Health

When smoke levels are high, even healthy people may have symptoms or health problems. **The best thing to do is to limit your exposure to smoke.** Depending on your situation, a combination of the strategies below may work best and give you the most protection from wildfire smoke. The more you do to limit your exposure to wildfire smoke, the more you'll reduce your chances of having health effects.

Keep indoor air as clean as possible. Keep windows and doors closed. Use a high-efficiency particulate air (HEPA) filter to reduce indoor air pollution. Avoid smoking tobacco, using wood-burning stoves and fireplaces, burning candles, incenses or vacuuming.

Listen to your body and contact your healthcare provider or 911 if you are experiencing health symptoms.

If you have to spend time outside when the air quality is hazardous: Do not rely on paper or dust masks for protection. N95 masks properly worn may offer some protection.

Stay informed: The Oregon Smoke blog has information about air quality in your community. oregonsmoke.blogspot.com

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Public Health Guidance: School Outdoor Activities During Wildfire Events

Check the local Air Quality Index (AQI) online (www.deq.state.or.us/aqi/index.aspx) and do a visual inspection outside.* Compare the AQI and visibility test to determine the air conditions in your community. Then, use the guide below to determine activity level for your students.**

Air Quality Index	Visibility Scale	Recess (15 min)	P.E. (1 hr)	Athletic events and practices (2–3 hrs)
Good	Over 5 miles	Great day to be active outdoors!	Great day to be active outdoors!	Great day to be active outdoors!
Moderate	5–15 miles	It is a good day for students to be active outside. • Watch students who are unusually sensitive to air pollution for symptoms of shortness of breath or coughing.	• Watch students who are unusually sensitive to air pollution. • Look for symptoms of shortness of breath or coughing. • Monitor symptoms and reduce or cease activity if symptoms arise.	• Watch students who are unusually sensitive to air pollution. • Look for symptoms of shortness of breath or coughing. • Increase rest periods and make substitutions for these students as needed. • Monitor symptoms and reduce or cease activity if symptoms arise.
Unhealthy for sensitive groups	3–5 miles	It is an OK day for students to be active outside. • Allow students who are unusually sensitive to air	• Move activities indoors for students sensitive to air pollution. • Limit other students to light outdoor activities or move them indoors.	• Move activities indoors for students sensitive to air pollution. • Limit other students to light outdoor activities or move them indoors.

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Templates

- – PDF templates designed as forms that auto populate text
- – Provide space for some customized quotes or facts
- – Note you may need to update your version of Adobe
- – Word versions are fully editable

Borrow and customize away!

Culture matters

- Language
- The perception of risk
- Beliefs about institutions, including government
- Credible sources of information
- Rituals for grieving and death

- Beliefs about family relationships and roles
- Beliefs about acceptable and appropriate forms of communication
- Emphasis on the individual v. the group

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Community-based Methods

Possible fit for tribes?

- Low tech – addresses some of the concerns tribes have shared

- Relationship and community focused

- Group thinking and decision-making leveraging local knowledge

- Communities often build on traditions to relay messages
    - Story-telling
    - Song
    - Dance
    - Images

- Adaptable

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Community-based Methods: Participatory learning and action

Initial community meeting

- Notify the community of activities.

- Invite the community into the process.

- Set expectations.

- Ask for support.

- Share results.

- Arrive at agreement on priorities.

- Obtain recommendations on who should participate on the Action Team (8-10 people).

- Make sure everyone is invited…this is a continuous process.

Typical day

- Head to the site

- Set up

- Train community participants in data collection

- Information collection (90 min for most; 2-3 hours for a walk-about or mapping)

- Writing up notes (as a team)

- Discussing the activities from that day

- Planning for the next

- Pack up and head home

The exercises

- Participatory map

- Walkabout

- Free-listing, add an asset focused list with your challenges

- Pile sorting

- Pair-wise ranking

- Venn Diagram

Record everything using the community's terms and language.

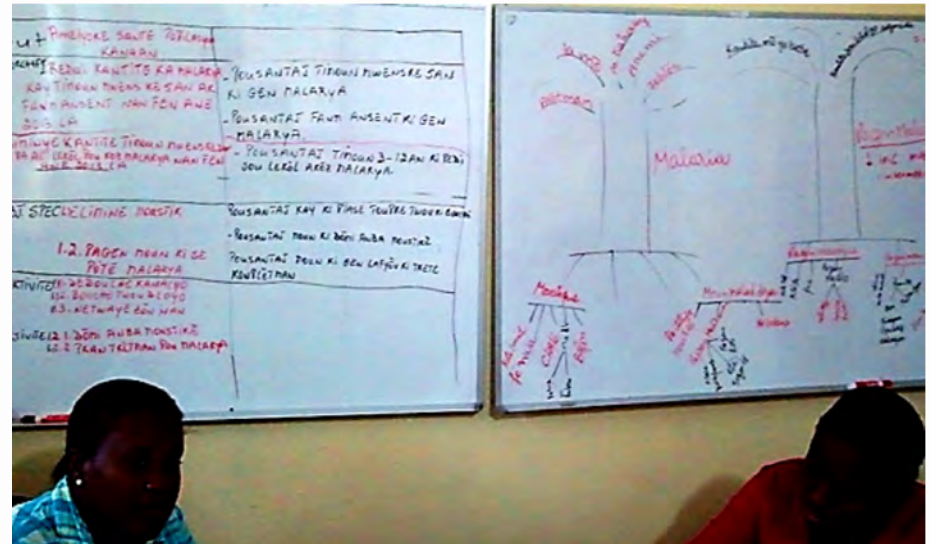Oregon
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The exercises

- Key informant interviews (optional)

There are others:
- Holistic Worldview Analysis
  (not in packet)
- Problem/Solution tree
  (not in packet)

Record everything using the community's terms and language.

Who should we talk to?

- Many methods to choose from….

  - Some are purely convenient…this is good for exploration or testing your tools.

  - Some are purposeful….this gets you closer to a small, but representative group.

  - Some are based on probability….this gets you closer having generalizable information.

- The choice often depends on the exercise, circumstances of the community, the needs and the capacity of the organization facilitating.

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Free Listing

Question 1: What are the main difficulties that people living in Canaan face? (List the names of each difficulty mentioned in local terms.)	Question 3: You mentioned _____ was a difficulty here. Please describe to me how this affects the lives of individuals faced with this difficulty?
1.	
2.	
3.	

Question 2: What are the primary assets that help people living in Canaan? (List the names of each difficulty mentioned in local terms.)	Question 4: You mentioned _____ was an asset here. Please describe to me how this affects the lives of individuals using this asset?
1.	
2.	
3.	

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Analysis of Free Listing

Form: Free Listing Tabulation Form- Problem and Asset Identification

Name of Item: Difficulties	Frequency #	Percent %

Form: Free Listing Tabulation Form- Problem and Asset Identification

Name of Item: Assets	Frequency #	Percent %

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Pair-wise ranking

PROBLEMS TO BE COMPARED AND RANKED

Problems	HUNGER	Water	Shelter	SICKNESS	"CAN" POVERTY	CONGESTION
HUNGER	X					
Water	Water	X				
Shelter	Hunger	Water	X			
SICKNESS	Sickness	Water	Sickness	X		
POVERTY	Poverty	Water	Poverty	Sickness	X	
CONGESTION	Hunger	Water	Shelter	Sickness	Congestion	X

	HUNGER	Water	Shelter	SICKNESS	"CAN" POVERTY	CONGESTION
TOTAL	2	5	2	4	2	1
RANK	3	1	4	2	5	6

Community-based Methodologies: Care Groups

In pure form…Care Groups

- Community-based strategy for promoting behavior change

- 10-15 Community based volunteers who meet regularly with staff for training and supervision

- Meet with 10-15 neighbors, sharing what they've learned and promoting behavior change.

- Can have a multiplying effect through peer to peer support

- Can lay the structure for non-technology based information systems

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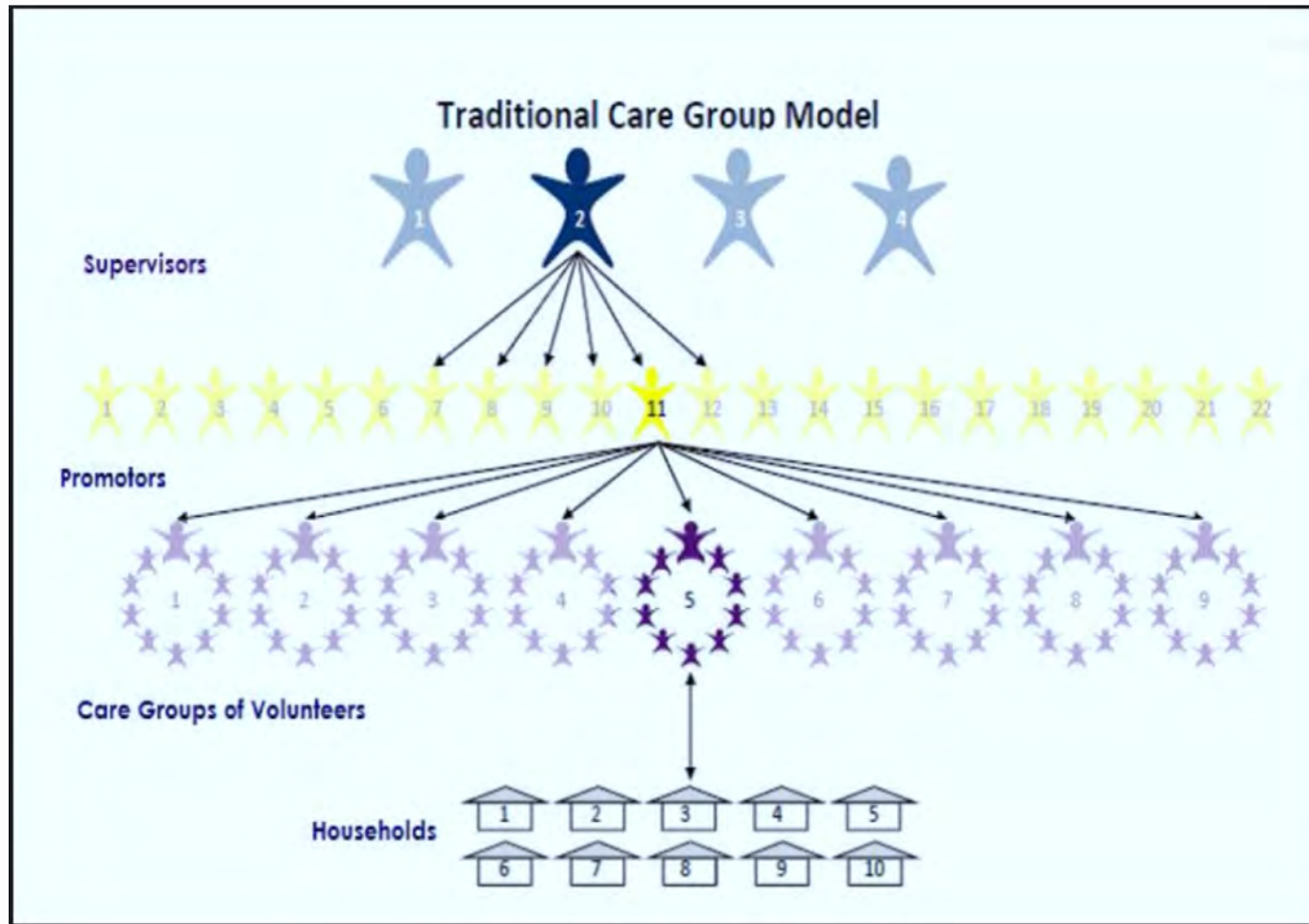Health
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Structure

Image taken from: https://www.curamericas.org/care-groups-the-innovative-community-based-strategy-to-improve-maternal-and-child-health/?ajax

Meetings

– Promoters teach care group leaders messaging & behaviors

– Care group leaders take it back to their neighborhood groups

– Each neighborhood group is made up of households that meet regularly

– Peer to peer messaging and promotion

– Participatory

– Should monitor attendance

– May need teaching an learning tools

– Quality Improvement Verification Checklists (QIVC)

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Meetings

Example activities:

- Build a preparedness kit.

- Deliver health or preparedness messaging.

- Conduct mass vaccination promotion & follow up.

- Build awareness and supporting referral for services.

- Small scale mitigation activities.

- Care group leaders and promoters can collect any information needed for a feedback loop.

Thoughts? Questions???
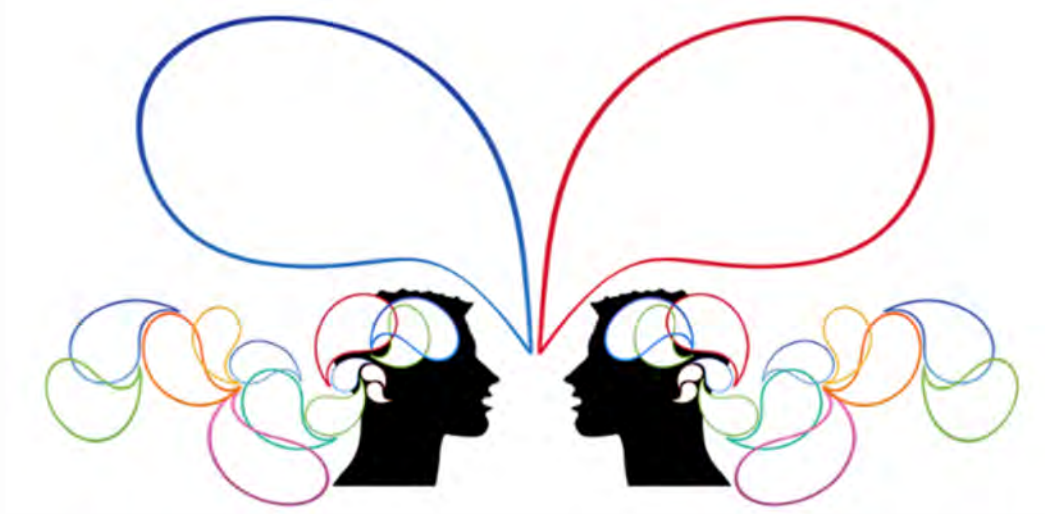
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» **Food Security and Nutrition Network Social and Behavioral Change Task Force. (2014) Care Groups: A training Manual for Program Design and Implementation. Washington, DC: Technical and Operational Performance Support Program.**

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» Na, J., Okada, N., & Fang, L. (2010) A participatory Workshop Approach to Scenario Development for Disaster, Relief, Response and Recovery Processes. *SMC* 978-1-4244-6588-0/10: 3433-3438.

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Resources

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» **Reynolds, B., Seeger, M., Palenchar, M., Gable, L., Holsinger, R. Neuberger, B. & Christoffel, T. (2014).** *Crisis and Emergency Risk Communication.* **Cox, J. et al. editors. Atlanta, GA: Centers for Disease Control and Prevention (CDC)**

» **Weiss, W., Bolton, P., & Shankar, A. (2000)** *Rapid Assessment Procedures (RAP) Addressing the Perceived Needs of Refugees and Internally Displaced Persons Through Participatory Learning and Action.* **2nd Edition.**

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