ASEF Public Health Network (ASEF PHN)
Risk Communications for Public Health Emergencies

WHAT TO LEARN FROM REAL-LIFE EVENTS

The first workshop in this series looked at selected real-life public health emergencies. The objectives of the workshop were to: (i) evaluate the challenges and capacity needs that impact communications during public health emergencies; and (ii) identify the core elements of functional lessons learned from health emergency communications. From this, participants produced 2 press conference statements, including problem analyses, a detailed description of the communication plans, proposals, identification of potential stakeholders, implementation requirements, and suggestions for next steps.

HOW CAN WE BE BETTER PREPARED FOR THE NEXT GLOBAL THREAT?

In 2016, ASEP and the European Centre for Disease Prevention and Control (ECDC) collaborated to organise a workshop on emergency risk communication. The workshop aimed to address the question of how national public health authorities can practically and logically start their preparedness planning. The ECDC also shared on what their role is in emergency risk communication as an integral part of public health preparedness.

REGIONAL EMERGENCY RISK COMMUNICATION TRAINING

In September 2017, ASEP and the General Department of Preventive Medicine, Ministry of Health Viet Nam (GDPM-MOH) co-organised a regional training for ASEAN+3 in 2017, the second risk communication event of the year. This training was carried out to assist these countries in setting a set of core capacities within each country to allow them to perform their responsibilities under the International Health Regulations (IHR, 2005).

The objectives of the training included: (i) stating the 6 principles of crisis and emergency risk communication (CERC); (ii) identifying appropriate communication channels based on the target audience’s needs; and (iii) discussing ways to engage partners and stakeholders for effective communication during a public health emergency; among others.

ASEF Public Health Network (ASEF PHN) is part of the ASEP Initiative for the Rapid Containment of Pandemic Influenza. The Asia-Europe Meeting (ASEM) leaders at the 7th ASEM Summit (2008) stated their determination to combat a possible human influenza pandemic. Reflecting this strong political statement, the initiative was officially launched in 2009 with the financial support from the Government of Japan.

ASEF PHN’s scope is not limited to pandemic influenza; it expands to infectious disease control as well as pandemic preparedness and response. Its mission is to increase ASEM Partners’ capacity to fight against emerging infectious diseases across Asia and Europe including pandemic influenza.

Since 2018, ASEP PHN’s work is also added on WHO’s Strategic Partnerships Portal website: Strategic Partnership for International Health Regulations (2005) and Health Security (SPH), under Donor Partner Landscape covering AMR, Emergency Preparedness and Risk Communications.

This project is sponsored by the Government of Japan.

BRIDGING THE HEALTH MECHANISM WITH HEALTHCARE WORKERS

After learning about real-life public health emergencies and their severity, the next workshop in the series focused on communication between national authorities and healthcare workers. Healthcare workers are at the front lines during health emergencies, and effective communication with them will determine how well the emergencies are handled.

The objectives of this workshop were to: (i) identify the core elements that facilitate and/or hinder reflecting the voices from healthcare workers in national risk communication strategies; and (ii) develop recommendations for strengthening national risk communication strategies that incorporate the needs of both national authorities and healthcare workers. Some of the proposed recommendations for strengthening national risk communication strategies included rapid approval of warnings and advisories; reflecting community perspectives back into emergency management decision-making; and a monitoring system through media and social media.

RISK COMMUNICATION AND LEADERSHIP DURING HEALTH EMERGENCIES

In June 2017, the first high-level meeting was organised, bringing together senior officials and risk communicators to explore good practices in managing the political interface and to make recommendations. The political interface is often a tough topic to broach, even though political commitment is essential to make risk communication effective. Political support is important to protect the public from health threats, as well as to prevent consequences to non-health sectors such as countries’ economy, trade, and tourism industries.

The recommendations adopted at this meeting included ensuring a cross-government team (including communications) is established during non-emergency times to include all government level response agencies; conducting risk communication training for leaders, healthcare workers, and other first responders; and establishing a rumour management and response system that addresses Distortions, Rumours, Untruths, Misinformation, and Smears (DRUMS).

HOW CAN WE INCLUDE MIGRANTS AND ETHNIC MINORITIES – NO ONE LEFT BEHIND

From understanding real-life emergencies, to the role of healthcare workers, and leading to the multi-sectoral approach brought 2018’s meeting to the discussion of not leaving anyone behind. The most recent meeting in this series addressed the ways the health and risk communication system can reach and engage migrants and ethnic minorities. The objectives of this meeting were to: (i) identify difficulties to inform diverse populations about public health emergency; (ii) discuss possible solutions to include migrants and ethnic minorities in emergency risk communication; and (iii) develop recommendations on actions needed to inform migrants and ethnic minorities about public health emergencies. A simulation exercise was also carried out to allow participants the chance to step in the shoes of various stakeholders in order to develop recommendations for the challenge presented.

Participants recognised 14 barriers to effective emergency risk communication with migrant and ethnic minorities, including language, discrimination and racism, literacy, the lack of political will, and the lack of access to information, among others. Participants then came up with a list of recommendations and best practices to overcome these barriers. Among the best practices were the need to understanding perceptions and concerns, the need for culturally and ethically appropriate interventions, peer-to-peer communication, and the use of simple and effective tools.

2018’s publication on risk communication for public health emergencies was picked up by the World Health Organisation’s Regional Office for Europe (WHO EURO). WHO EURO 2019 Summer School on Refugee and Migrant Health looked at the theme of emergency response to long-term inclusion policies, and the publication was among the reference guides and materials used for the curriculum.