Developing Communications Products

LHDs should think broadly about what constitutes a communications product and communicate through a variety of channels—an interview with a print or broadcast journalist, a teleconference, a presentation to a school class, a clinic sign-in, a contest that could garner publicity, a meeting with key policy-makers, and so on.

A useful way to think about communication materials or products is that they are either enduring or time-limited. Most communications components of a local health department, program, or project will use both types of materials, in order to exploit the advantages of each type and to reach different audiences at different times. The following table illustrates the main differences between these two types of products:

Enduring Products

Enduring products are intended to last for several years or for a discrete project's duration. Examples of enduring products are fact sheets, PowerPoint presentations, brochures, and study reports. Enduring products are highly effective at establishing a brand, attracting ongoing support, and serving as a reference for your community. These items are usually appropriate for all audiences in your community.

Time-limited Products

As opposed to enduring products, time-limited products are designed to be useful only for a small period of time. This may be a matter of days, weeks, or months. Examples of a time-limited product include news releases, e-newsletters, meeting announcements, and social media posts. While enduring products may take a while to create, time-limited products are flexible and timely, meaning they can be produced more quickly, and they're often targeted at a narrow segment of your community, such as an age group, ethnic group, or consumers of a specific public health service.

As with developing messages and talking points, the same principles apply to developing communications materials. Clarity, plain language, keeping it local, putting a face on it, providing a believable reward, minimizing the use of statistics—these are all are essential elements to embrace as you develop different sets of materials to appeal to the values of each major stakeholders group.

Follow these specific steps to develop communications products:

- ❖ Define the message, consistent with the mission, core concept, and overarching strategy
- ❖ Identify the audience

- ❖ Decide what type of product, such as a fact sheet or Web posting, will work best for this message and audience, given your resources
- ❖ Establish a budget
- ❖ Assign responsibility for reviewing drafts and approving the final product
- ❖ Assign responsibility for writing, design, or posting content
- ❖ Develop a dissemination strategy
- ❖ Prepare, review, and revise drafts, including review by some members of the target audience, if feasible
- ❖ Produce and disseminate
- ❖ Evaluate and modify, as appropriate

Tip: Piggyback One Product onto Another: Small packets of materials can be handed out at conferences and presentations, or links can be added to Web postings and social media feeds.

Deadlines are essential to ensure that materials are produced and delivered on time. Deadlines should be realistic, mutually agreed on, frequently acknowledged, and enforced. They should apply not only to writers, designers, webmasters, and printers, but also to the reviewers of your draft materials.

Communicating During a Crisis

Definitions and Examples

Crisis communications anticipates, prevents, and manages information about sudden threats to an organization's basic reputation for honesty and effectiveness. Having a crisis communications plan in place, for example, can prevent a local health department from being criticized by the public for failing to anticipate a disease outbreak, failing to respond quickly and effectively to a disaster, or misleading the public. Emergency risk communications anticipates, prevents, and manages information about sudden threats to public health and safety, usually related to environmental exposure. For example, emergency risk communications is needed during a public health emergency, such as an incidence of terrorism or an outbreak of food-borne illness.

In 2001, crisis and emergency risk communications became a public health priority during the anthrax episode. Public health officials lost a great deal of credibility when the U.S. Secretary of Health and

Human Services falsely implied that the lethal anthrax was naturally occurring rather than man-made, and as CDC officials tried to avoid media contact when they were unsure of the facts.

In 2003, the need for competence in crisis communications became even clearer during the SARS outbreak. When Toronto officials responded so unconvincingly, news organizations found their own experts to explain what was going on, and they sharply criticized the public health officials in charge.

In both cases, the authorities lost control of the story.

Creating an Action Plan

The importance of effective communications during a public health disaster is not new. In 1947, the New York City Health Department responded brilliantly to a smallpox outbreak. This response convinced most New Yorkers to accept health department advice about vaccination, avoided panic, and may have saved many lives. Key to this success was the health department's preexisting credibility with the news media, which it earned by proactively providing accurate information over many years.

Local health departments should develop an action plan well in advance of any crisis. Crisis and emergency risk communications begins with preparation, based on reasonable predictions about events that could occur.

Start by making a list of potential sudden threats to public health or to the LHD's reputation. Make sure you take time to develop candid, ongoing, "beforehand" relationships with news media, opinion leaders, potential spokespersons, and your counterparts in other agencies.

Be prepared to use numerous communications channels. An organization cannot just rely on large news organizations to transmit local health messages—social media, schools, religious and civil rights leaders, foreign language media, health care professionals and providers, public safety and law enforcement officials, and others must be engaged, as well. These sources can best be reached through honest, supportive, and fast responses to people's concerns. Finally, reach out to key stakeholder sources, consolidate your contact information, and prepare a tentative chart for engaging multiple sources. Keep the chart confidential, as appropriate. Then keep it up to date.

Tip: Use Complementary Messages: Complementary messages that can be expressed by both public health and political leaders. Political leaders usually emphasize that they are in control of the situation and that the community is safe.

The Five-stage Lifecycle of a Crisis

Crises display a cyclical pattern. Following a dormant phase, the cycle begins with a shocked public reaction to a critical event or finding, and it ends with public retrospection in the aftermath of the crisis.

Experts have identified five stages of the crisis and emergency risk communications cycle: pre-crisis, initial response, maintenance, resolution, and evaluation. Each stage requires a unique set of activities. Here are some selected activities, by stage.

Pre-crisis

- ❖ Prepare action plan
- ❖ Foster alliances and relationships

Initial response

- ❖ Acknowledge the event with empathy
- ❖ Explain and inform the public about the risk in clear terms—what is known, what is not known, and the plan and timetable for learning more
- ❖ Establish spokesperson credibility
- ❖ Provide contacts for more information
- ❖ Commit to ongoing communication with stakeholders and the public

Maintenance

- ❖ Help the public understand the continuing and emerging risks
- ❖ Provide comprehensive information to those who need it
- ❖ Gain support for response and recovery plans
- ❖ Obtain feedback from stakeholders and audiences and correct misinformation
- ❖ Promote decision-making based on a reasonable assessment of risks and benefits

Resolution

- ❖ Persuade the public to support commitment of resources
- ❖ Promote the LHD's capability

Evaluation

- ❖ Evaluate performance
- ❖ Document lessons learned
- ❖ Recommend and implement specific actions for improvement.

Tip: Crisis Management Requires Training: "Leaders should be required to have education, training, and practice in crisis and risk communications." - Laura H. Kahn, Who's in Charge Leadership During Epidemics, Bioterror Attacks, and Other Public Health Crises, 2009.