



衛生防護中心
Centre for Health Protection

Risk Communication Advisory Group (RCAG)

A Discussion Paper on the Risk Communication Strategies for the Centre for Health Protection

Purpose

1. This paper proposes a three-year risk communication strategy for the Centre for Health Protection (CHP).

Background

Defining the Scope of the Risk Communication Strategies

2. *Strategy* is the creation of a unique and valuable position, involving a different set of activities.¹ For the purpose of this paper, a *strategy* can be defined as a methodological framework for achieving responsive risk communication by the CHP which is newly established to protect people's health through effective disease prevention and control.



衛生防護中心乃衛生署
轄下執行疾病預防
及控制的專業架構
*The Centre for Health
Protection is a
professional arm of the
Department of Health for
disease prevention and
control*

3. Using the World Health Organisation (WHO) definition, *risk communication* is embraced in the concept of *risk analysis*, which consists of three components: risk assessment, risk management and risk communication. *Risk communication* is an interactive exchange of information about health risks among risk assessors, managers, news media, interested parties and the general public.

Need for Risk Communication Planning in Hong Kong

4. In 2003, the Severe Acute Respiratory Syndrome (SARS) global epidemic was first reported in Asia, and then rapidly spread to more than 2 dozen countries in North America, South America and Europe. The outbreak claimed 299 lives in Hong Kong and brought enormous and unprecedented challenge to the local healthcare system.

5. In the wake of the epidemic, the SARS Expert Committee was appointed by the Government of the Hong Kong Special Administration Region to review actions taken and make recommendations. The Committee identified, among other things, scope for improving the health care sector's risk communication capabilities. It highlighted the importance of risk communication as an integral part of public health, and recommended the overall responsibility for devising a communication strategy in advance of a communicable disease outbreak to be given to CHP under the Department of Health (DH).

6. In early 2004, DH commissioned overseas experts to conduct a Public Health Preparedness and Response Capacity Assessment tailored to local needs as well as provide training to public health officials in risk communication.

7. When the CHP was established in June 2004, it acted quickly by incorporating 'responsive risk communication' as one of its key corporate commitments. The CHP strengthens the public health system against communicable diseases (CD) and other public health hazards. On another front, it also develops plans to tackle non-communicable diseases (NCD) in a more strategic way.

The Role of the Risk Communication Advisory Group

8. The Risk Communication Advisory Group (RCAG) was appointed in June 2004 to advise the Controller on the formulation of risk communication strategies and action plans in the CHP, to establish and reinforce communication networks for timely and effective communication of risks associated with CD and NCD, to facilitate CD and NCD risk communication using a variety of channels and means, and to provide independent assessment and feedback on the effectiveness and relevance of risk communication actions implemented by the CHP. The setting up of the RCAG within the advisory structure of the CHP taps into the wealth of community wisdom, intelligence and network for effective risk communication.

9. Within the CHP, all its branches are involved in risk communication to varying extents, more so by the Surveillance and Epidemiology Branch, Infection Control Branch, Emergency Response and Information Branch, and the Programme Management and Professional Development Branch. The latter two branches have staff represented in the RCAG to ensure connectivity of discussions and ideas between the RCAG and various branches of the CHP.

10. In preparing this paper, the RCAG Secretariat has resorted to a variety of means, from formal and informal discussions to review of literature and administrative files, to generate a broad base of useful information before arriving at a proposed framework for risk communication.

The Framework

11. The CHP's risk communication framework consists of five core elements. They are the aim, principles, components, action areas and timeline. These are outlined in the ensuing paragraphs.

Aim

12. The aim of risk communication is to build and develop an informed, health conscious community, which will be self-reliant and able to act responsibly, rationally and promptly in face of public health threats.

Principles

13. Effective risk communication requires the CHP as an organization to commit itself to a set of principles, or core values, which are specific to organizational and environmental needs and circumstances. Taking reference from the Civil Contingencies Secretariat Report of the UK Cabinet Office², this paper proposes the following principles to be adopted by the CHP :-

openness and transparency – the CHP should maintain an open and transparent image in disease control and prevention

engagement – the internal and external partners should be involved in all stages of preparedness and implementation of risk communication

proportionality – the involvement of partners and the actions taken should be proportionate to the level of protection needed in crisis situation, and the scale and

means of risk communication deployed should be subject to the respective level of situation

evidence – risk assessment process should be evidence-based and all relevant factors, including public concerns, should be taken into account

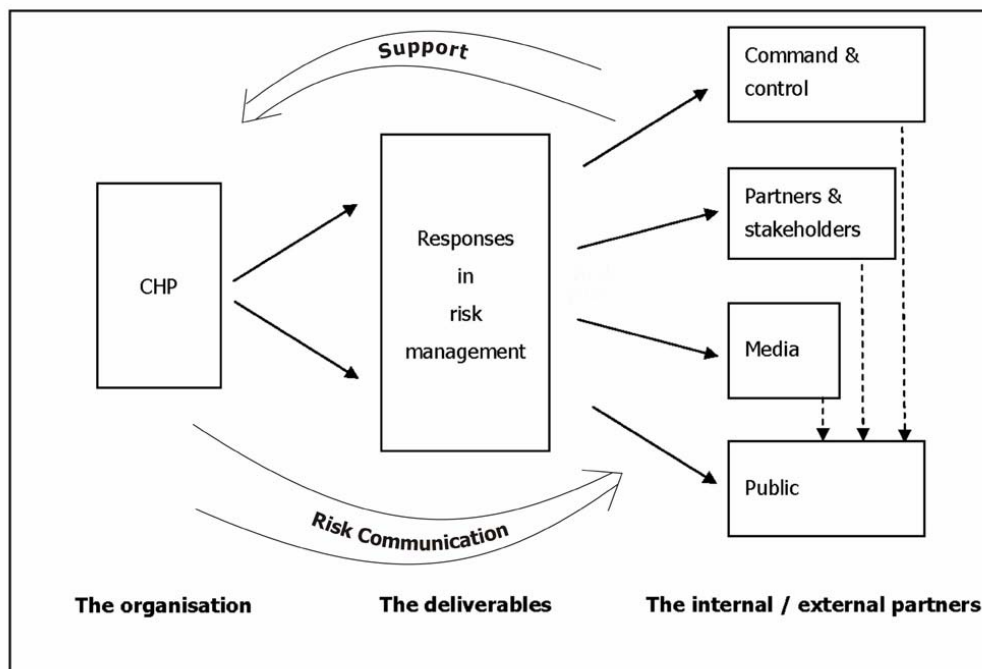
empowerment and choice – the public should be empowered to reflect their opinions in health matters through available channels

Components

14. The risk communication system can be viewed as a model having four components:-

- the CHP as an organization of excellence
- internal and external partners acting as stakeholders of and agents for communication with the public
- communication messages issued by the CHP regarding its efforts on disease prevention and control, and
- the communication processes that enable or facilitate risk communication

These components are inter-related as depicted below. One component hinges on the other which in turn affects the entire system, implicating the effectiveness of risk communication.



15. The CHP believes that the better informed the public is of inherent risks of and protective actions to be taken in response to public health threats, the greater the support generated for its health protection actions.

Action areas

16. To enhance CHP's capacity in communicating risks effectively, a number of action areas are identified within each of the four components previously described. On organization, resources have to be committed to enhancing expertise and the evidence base of CHP's actions, particularly in risk analysis and risk management. Development of emergency preparedness plans and maintenance of vigilance against untoward incidents and threats are cases in point. Training in risk communication skills and understanding of the ecology and operations of the mass media are as important.

17. On stakeholder coordination, command and information control within the CHP needs to be strengthened and tested regularly for robustness, major stakeholders and key contact points need to be identified and connected through reliable and effective communication networks, the media has to be systematically briefed on 'topics of interest' and CHP's contingent actions as well as given access to timely and accurate information to perform its information dissemination functions, and the public should be provided with direct access to health information using a variety of means. Consideration should be given to consult and engage the community on issues of significant public health implications or involving value judgments.

18. Regarding CHP's efforts on disease control and prevention, conscious and ongoing efforts should be taken to inform the public and interested parties about commitments and achievements made by the CHP. Use of multiple languages to address minority groups should be considered. Mistakes should be rectified as soon as possible to enhance credibility. Where appropriate, third party endorsements should be used. Open and regular communication will only reinforce the image of the CHP as a professional and trustworthy organization.

19. In the process of communicating risks, due regard should be paid to the use of an integrated risk communication protocol that starts at pre-crisis phases, delineates responsibilities, directs operations, spells timeframes and clearance procedures. Information penetration to intended audience should be ensured. As important is the use of regular channels and procedures to communicate with and collect feedback and expectations from stakeholders.

Timeline

20. Based on the RCAG-endorsed strategic framework, respective branches and parties of the CHP would define risk communication actions along the strategic direction and action areas. The RCAG secretariat would consolidate a CHP risk communication action plan and coordinate regular updating, for comments and advice from RCAG members. Ongoing evaluation of the deliverables and achievement of tasks would be conducted.

Opinion sought

21. Members are invited to comment on the proposed risk communication strategic framework and advise on actions to operationalise, monitor and evaluate the framework.

Reference

¹ Michael E. Porter. Competition and Strategy: Core Concepts. What is Strategy? Harvard Business School Press, 1998.

² The Civil Contingencies Secretariat, UK. Communicating Risk, Tool-kit; 2004. Available at: http://www.ukresilience.info/risk/section2/2_5.htm (accessed Nov 2004)

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