PLANNING RISK COMMUNICATIONS FOR EVD PREVENTION AND CONTROL: PRACTICAL SESSION
Objectives

• To ensure that participants understand essential elements of risk communication planning, specifically audience segmentation and formative research.

• To ensure that participants understand the importance of planning risk communications that are targeted for specific audiences.
Priority Groups/Audiences

• Primary Target Audiences (PTA): people who may be directly affected by EVD, through direct exposure to a case
  – Travellers from countries of intense EVD transmission, relatives of travellers, community members who live where the positive case lives

• Secondary Target Audiences (STA): people who can influence the health decisions of the PTA
  – Health professions, HEPO, teachers, politicians, media professionals, celebrities
Group work

STAGE OF OUTBREAK: INTRODUCTION OF EVD

Step 1: Groups will list at least 4 PTAs and 3 STAs in their regions (10 minutes)

Step 2: Groups will pick one PTA and one STA to focus on for the risk com planning session

Step 3: You will receive two matrixes. Fill out one matrix for each target audience (15 minutes)

Step 4: Present back in plenery
Audience Segmentation

• Why are we communicating?
• Who is our audience?
• What do our audiences want to know?
• What do we want to communicate?
• How will we communicate?
• How will we listen (formative research plan)?
• How will we respond?
• Who will carry out the plans? When?
• What problems or barriers have we planned for?
• Have we succeeded?
Risk Communications planning

<table>
<thead>
<tr>
<th>Target Audience (specific):</th>
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<tbody>
<tr>
<td><strong>Objective of communication:</strong> What are the desired behaviour outcomes? These need to be Specific, Measurable, Achievable, Realistic and Timed.</td>
</tr>
<tr>
<td><strong>Channels, tools and activities to be used?</strong> What do we know about the behaviours, habits and daily routines of the TA? What is the best mix to reach the TA?</td>
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<td><strong>How will we listen to this TA?</strong> What do we need to hear from the TA? What methodologies can we use to learn more about this TA?</td>
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<tr>
<td>Who will be tasked with the above?</td>
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<tr>
<td>What problems or barriers have we planned for?</td>
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<tr>
<td>Success milestones</td>
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Formative research

What else do we need to know about our TA before we implement risk communications?

• Knowledge and attitudes around EVD transmission
• Perceived EVD susceptibility
• KAPs around EVD prevention measures
• Perceived benefits of adopting preventive behaviours
• Perceived self-efficacy of adapting preventive behaviours
• Perceived barriers and costs of adopting preventive behaviours
Stages of Change

Note that this is not always a linear process!

- Pre-contemplation: no intention to change
- Contemplation: aware that problem exists but not yet made commitment to take action
- Determination: intending to take action
- Intention: considering making change
- Action: behaviour is trialled
- Maintenance/advocacy: maintains desired behaviour and becomes an advocate

• [relapse]
Identify Stage of Change

The Stages of Change Model

- Enter
- Precontemplation
- Contemplation
- Determination
- Action
- Relapse
- Maintenance

Exit & re-enter at any stage
Further reading

3. www.wpro.who.int/emerging_diseases/documents/docs/APSEDTechnicalPapers03Sep10Final.pdf
RISK COMMUNICATIONS: Communicating RISK not PANIC