11:10am – 11:25am

Public health messaging - what evidence is there about what makes public health messaging effective in times of crisis

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Issues for consideration

- Anxiety
- Issues about trust
- Different stages
- Processing health information
- Risk perception
- Uncertainty
- Health literacy
- Alert fatigue
Our aim

To conduct a rapid review of the literature to identify and synthesise evidence relating to effective communication methods for informing the public of how to manage risks and prevent transmission during times of public health pandemics or epidemics.
Objectives

To examine the use of different types of messaging for different time points during an ongoing pandemic where information may be required to change.

To identify evidence for effective public health communication strategies in supporting key behaviour changes required to manage health risks.

To identify types of communication useful for different types of messages.

To examine the use of different types of messaging for different time points during an ongoing pandemic where information may be required to change.
Methods

- **Type of interventions/public health communication:**
  - Mobile tech, news broadcasts, newspapers, newspapers, press conferences, social media, post/letters

- **No restrictions on study design**

- **Adult populations (aged 18 and over)**

- **Intervention(s):**
  - Strategies used to communicate uncertainties, different sources of information, timing of recommendations

- **Main outcome(s)**
  - Impact on public acceptance of health messages, compliance with recommendations, perceptions and psychological impact of risk information; changes and shifts of information during the course of the event/emergency.

Prospero ID: CRD42020188704
Literature search

- **Search strategy**
  - Studies published in English

- 4,569 potentially relevant articles and 518 through other sources (pre-print and grey literature)

- 432 full text screening

- 35 included to present preliminary findings
  - 3 systematic reviews
  - 32 individual studies
    - Randomised Control Trial: 2
    - Survey: 9
    - Qualitative design: 16
    - Experimental: 3
    - Rapid review: 1
    - Commentary: 1

- Public Health Crisis include: H1N1 (12), Influenza (3), SARS (2), COVID-19 (1), Ebola (4), West Nile Virus (1), Bird Flu (1), Zika (1)
Preliminary findings: Identifying barriers

Different levels of preconceptions

Misconceptions about self and distance to risk

“Boomerang Effect” need behavioural modelling too not just prompts

Simultaneous knowledge of threat and alert level induces panic

Preliminary findings: recommendations

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Modifiable</th>
<th>Impact on Perceptions</th>
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<tbody>
<tr>
<td><strong>Address uncertainty</strong></td>
<td>• Acknowledge changing information</td>
<td>Increase trust</td>
</tr>
<tr>
<td>12, 13, 14, 15, 16, 17, 28</td>
<td>• Co-ordinations between sources</td>
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<td></td>
<td>• Admitting errors</td>
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<td></td>
<td>• Credible sources</td>
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<td></td>
<td>• Positive and solution-oriented messages</td>
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<tr>
<td><strong>Engaging communities</strong></td>
<td>• Targeting &amp; tailoring</td>
<td>Relevance and relatable</td>
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<tr>
<td>18, 19, 20, 21, 22, 23, 24, 25, 26, 27</td>
<td>• Using translations</td>
<td>Build resilience in community</td>
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<td></td>
<td>• Using different mediums to overcome barriers to access</td>
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<tr>
<td><strong>Unified messaging</strong></td>
<td>• Identifying inconsistencies</td>
<td>Understanding message and accuracy</td>
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<tr>
<td>28, 29, 30, 31, 32</td>
<td>• Increase awareness (especially at the beginning)</td>
<td>Perceive higher risk</td>
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<td>• Clear instructions are more memorable</td>
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<td><strong>Message framing</strong></td>
<td>• Language choices (e.g. outbreak vs. epidemic)</td>
<td>Understanding and knowledge of threat</td>
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<td>33, 34, 35, 36</td>
<td>• Shifting locus of control (external factors vs. internal factors)</td>
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<td><strong>Behaviour</strong></td>
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Conclusions

Public health messaging is a complex issue - the aim should not just be about increasing knowledge and awareness as these alone will not change behaviours or increase adherence to behaviours.

“One size fits all” approach is alienating and increases likelihood to ignore the messages however, there needs to be a balance of consistency and tailoring taking into account preconceptions.

Next steps ... continue synthesising data and writing a report to give clear recommendations and how to address barriers.