Communicating Changing Guidance Webinar: Lessons from Zika and Beyond

June 25, 2018

The webinar will begin at 12:00 PM ET.

Please listen through the audio on your computer.

NACCHO
National Association of County & City Health Officials

Logistics

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- Please listen through the audio on your computer
- This call is being recorded and the recording will be shared
- Submit questions through the Q&A Box at any time. We will discuss questions at the end of all the presentations
- If you need technical assistance, please use the Q&A box or email infectiousdiseases@naccho.org

Speaker Introductions

NACCHO
National Association of County & City Health Officials

Victoria Carter, PhD, MPH

Health Communication Specialist, National Center for Emerging and Zoonotic Infectious Diseases, CDC

Speaker Introductions

NACCHO
National Association of County & City Health Officials

Meredith Li-Vollmer, PhD

Risk Communication Specialist,

Public Health – Seattle & King County

Communicating Changing Guidance During the Zika Outbreak

Victoria Carter, PhD, MPH

NACCHO Webinar

June 25, 2018

The landscape

Emergence of the Zika outbreak

- **Before 2015:** Zika outbreaks occurred in areas of Africa, Southeast Asia, and the Pacific Islands, with few cases recorded.
- **May 7, 2015**: Pan American Health Organization issues an alert regarding the first confirmed Zika virus infections in Brazil.
- **Since May 2015:** CDC has been responding to increased reports of Zika and has assisted in investigations with PAHO and countries' ministries of health.
- **June 9, 2015**: CDC posts first travel notice for Zika virus in Brazil.
- **December 2015**: the Commonwealth of Puerto Rico reported its first confirmed locally transmitted Zika case.
- **January 22, 2016**: CDC activates its Emergency Operations Center to respond to outbreaks of Zika.
- **February 8, 2016:** CDC elevated its EOC activation to a Level 1, the highest level.
- **February 1, 2016:** World Health Organization declares a Public Health Emergency of International Concern because of clusters of microcephaly and other neurologic disorders in areas affected by Zika.

Communicating in a unique environment

- Prior to 2015, Zika was virtually unknown
  - Approximately 25 scientific articles had been published on Zika at the time
  - Initial messaging developed based on what was known
- Continual discovery of new and/or changing information in several fields
  - Required messaging and materials to be quickly updated and redistributed each time
- Virus characteristics, as well as the expansive outbreak area, created multiple target audiences, professional and public
  - Varying languages and literacy levels
  - Differing practices and opinions
- This outbreak was CDC's most complex response to date, spanning across several of the agency's centers

Developing guidance

Types of guidance developed by CDC

- Transmission prevention: vector and sexual
- Clinical diagnosis and testing
- Caring for patients with Zika or Zika exposure
  - Pregnant women
  - Infants
- Laboratory
- Conception and pregnancy prevention
- Vector control
- Travel: for people going to and returning from areas with risk of Zika
- Planning for state and local health departments
  - Zika Interim Response Plan
  - Zika Communication Planning Guide for States
  - Interim CDC Recommendations for Zika Vector Control in the Continental United States
  - Toolkit for Investigating Possible Local Mosquito-Borne Transmission of Zika Virus

Guidance formats

Controlling Mosquitoes at Home

Language: English (US)

Control mosquitoes outside your home

Remove standing water where mosquitoes could lay eggs

- Once a week, empty and scrub, turn over, cover, or throw out any items that hold water like tires, buckets, planters, toys, pools, birdbaths, flowerpot saucers, or trash containers. Mosquitoes lay eggs near water.
- Tightly cover water storage containers (buckets, cisterns, rain barrels) so that mosquitoes cannot get inside to lay eggs.
- For containers without lids, use wire mesh with holes smaller than an adult mosquito.
- Use larvicides to treat large containers of water that will not be used for drinking and cannot be covered or dumped out.
- If you have a septic tank, repair cracks or gaps. Cover open vent or plumbing pipes. Use wire mesh with holes smaller than an adult mosquito.

CDC
@CDCgov
Follow

There is no vaccine to prevent Zika. The best way to prevent #Zika is to protect yourself from mosquito bites.

7:00 AM - 23 Mar 2016

192 Retweets 90 Likes

4 192 90

Morbidity and Mortality Weekly Report (*MMWR*)

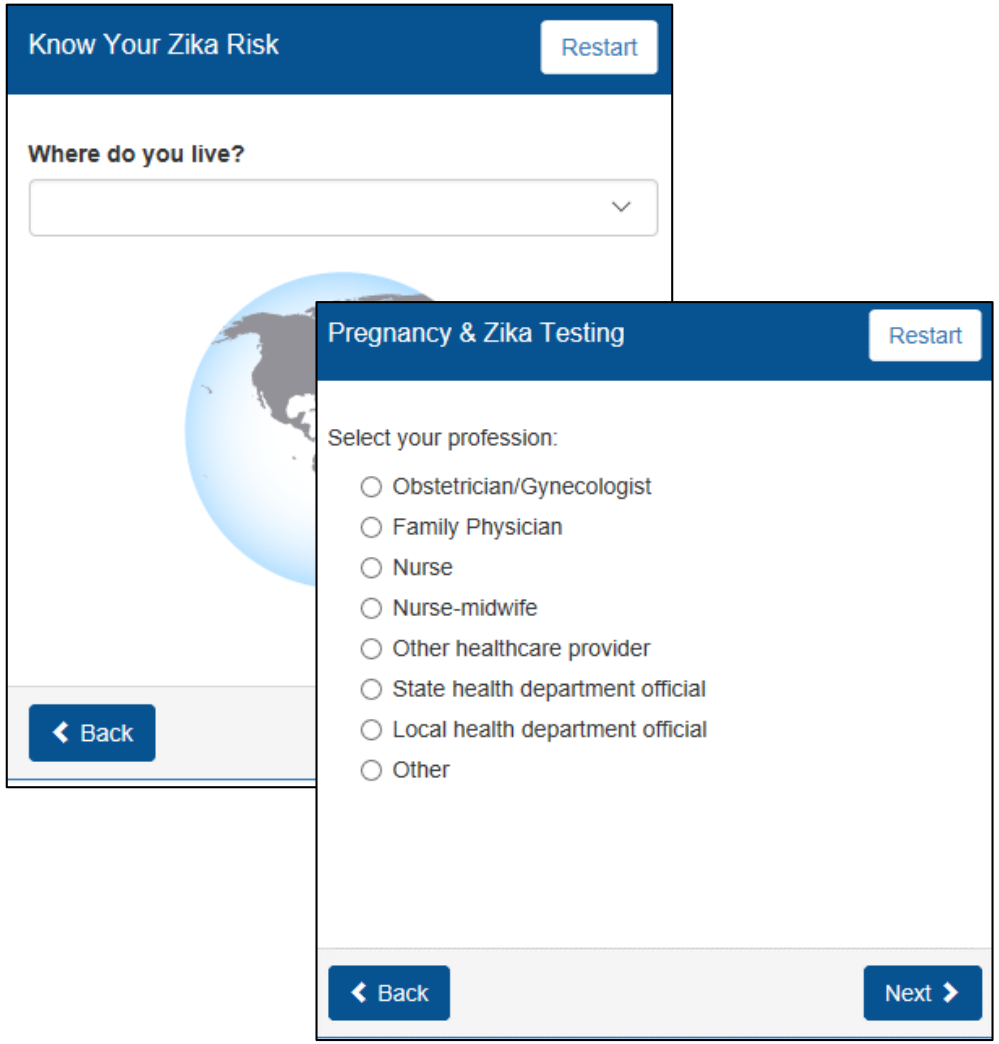
CDC > MMWR

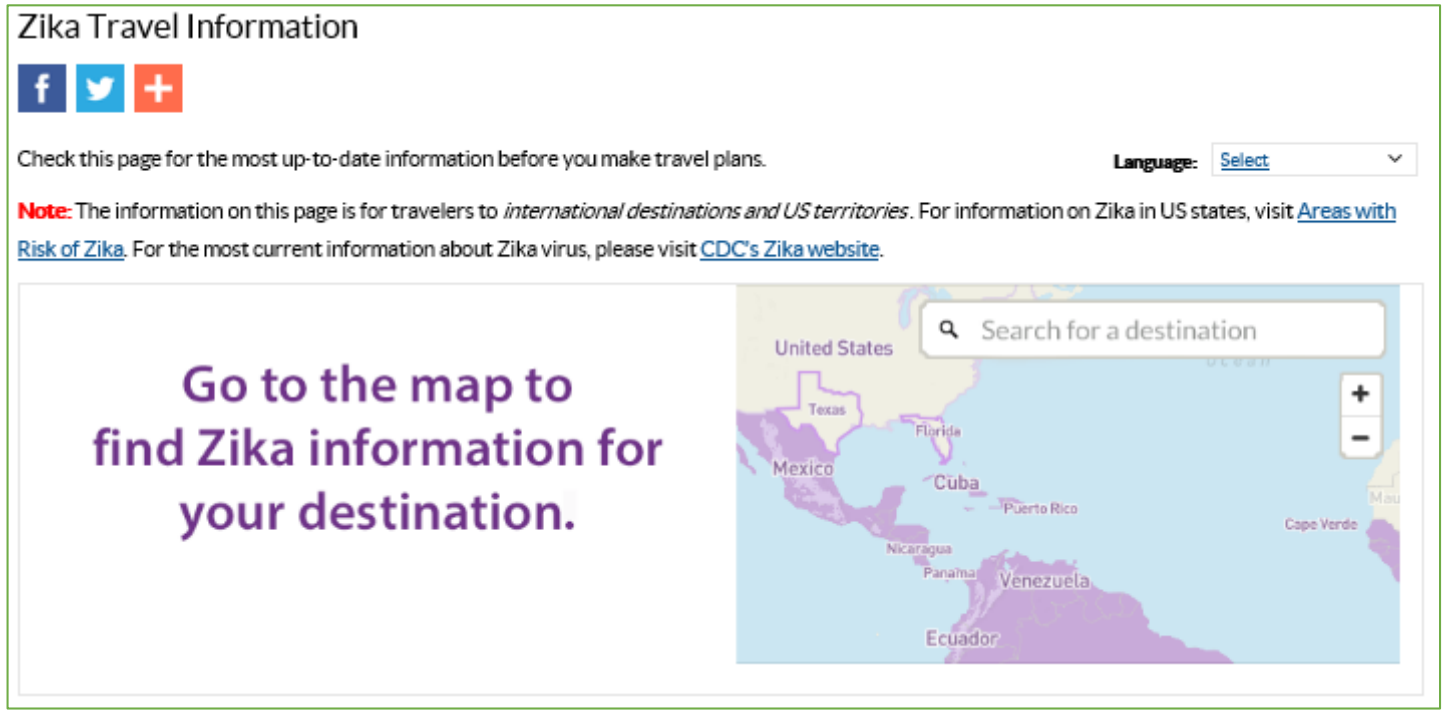
Update: Interim Guidance for the Diagnosis, Evaluation, and Management of Infants with Possible Congenital Zika Virus Infection — United States, October 2017

Weekly / October 20, 2017 / 66(41);1089–1099

Format: Select One

Interactive guidance

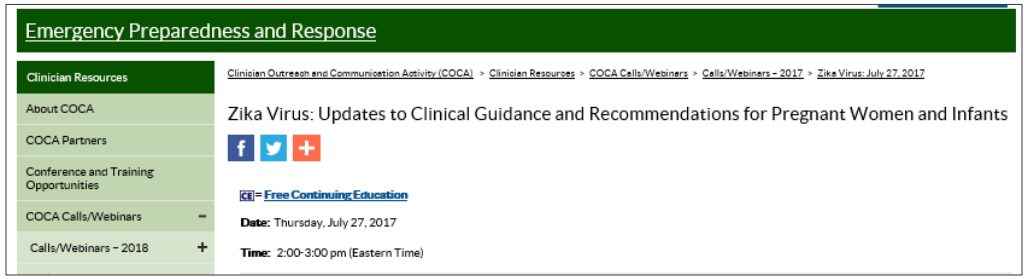




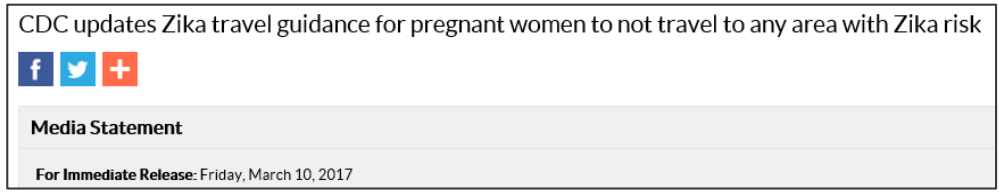
Communicating

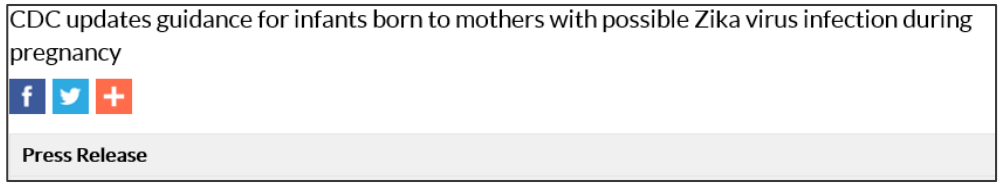
Communicating guidance

- Used channels that would reach key target audiences
  - Professional audiences (healthcare providers, laboratories)
    - Clinician Outreach and Communication Activity (COCA) calls
    - MMWR
    - Zika Website
    - HAN



  - For the public, specifically at-risk populations
    - Website (Zika & CDC's travel website)
    - Multiple social media channels
    - State and local health departments
    - Community organizations/partners





- CDC often issued press releases/media statements for new guidance

Make guidance easy to find

For Healthcare Providers

Language: English (US)

Summary

- Zika virus disease is a nationally notifiable condition. Healthcare providers should report suspected Zika virus disease cases to their state, local, or territorial health department to facilitate diagnosis and mitigate risk of local transmission.
- CDC recommends that pregnant women should not travel to areas with risk of Zika. Pregnant women with Zika symptoms and with possible exposure to Zika virus should be tested for Zika virus infection. Pregnant women with no Zika symptoms but who have ongoing Zika exposure should be offered Zika testing.
- Women and their partners should plan their pregnancies in the context of the Zika outbreak. Healthcare providers should discuss reproductive life plans, including pregnancy intentions and timing of pregnancy, with women of reproductive age.
- Zika testing and evaluation for infants is based on the mother's possible exposure to Zika virus during pregnancy.

ZIKA TOPICS

Clinical Guidance

- Pregnant Women
- Infants and Children
- Women of Reproductive Age
- Sexual Transmission
- Infection Control

Guidance

- Testing Guidance for Non-Pregnant Symptomatic Individuals, Symptomatic Pregnant Women, and Asymptomatic Pregnant Women
- Update: Interim Guidance for Health Care Providers Caring for Pregnant Women with Possible Zika Virus (MMWR, July 24, 2017)
- Update: Interim Guidance for the Diagnosis, Evaluation, and Management of Infants with Possible Congenital Zika Virus Infection — United States, October 2017 (MMWR, Oct. 19, 2017)

Make it clear what is new

10/6/17 FOR EXTERNAL USE

KEY MESSAGES – ZIKA VIRUS DISEASE

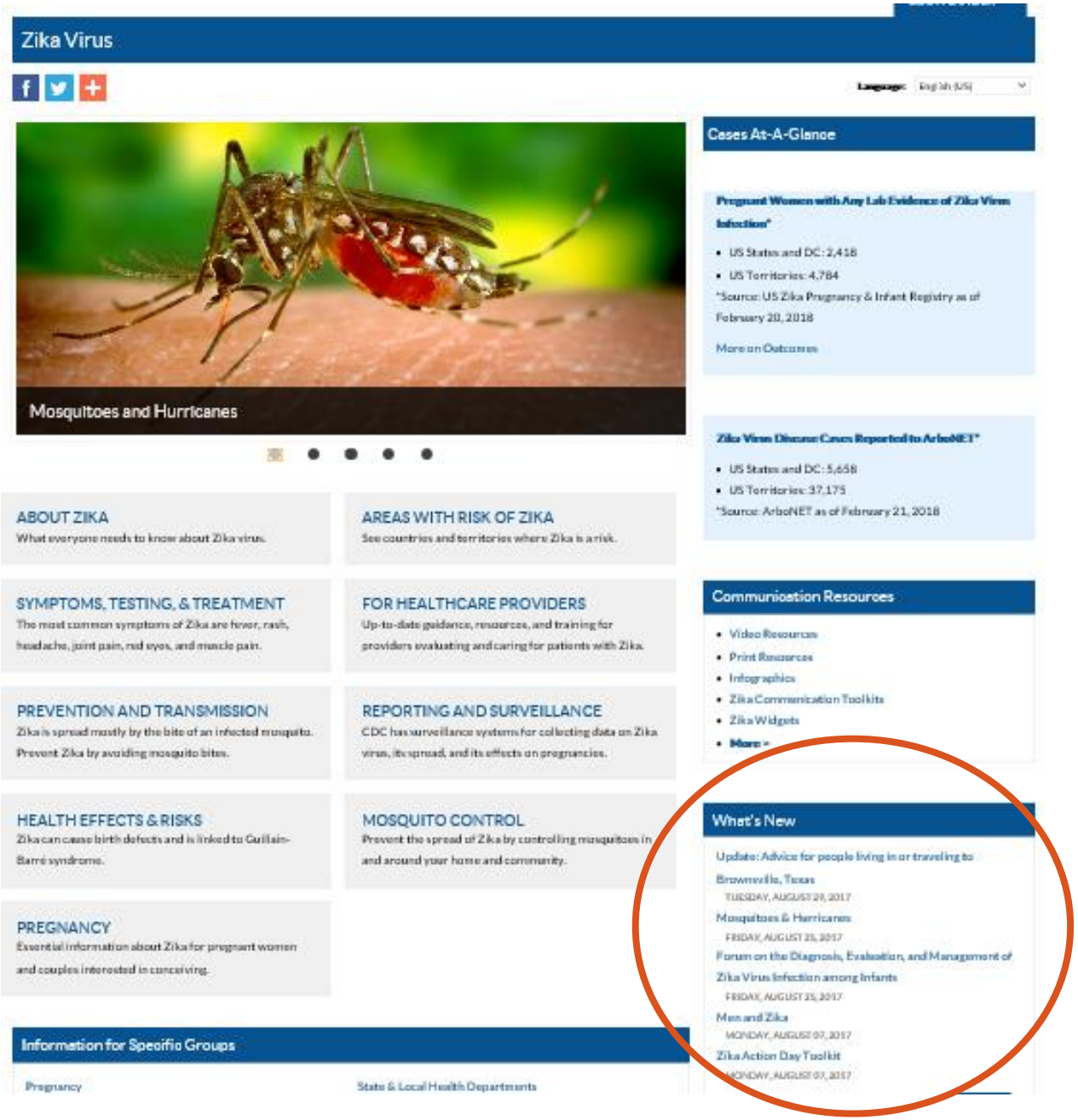
Purpose: This document is for internal and external use. The document contains cleared key messages for use in developing other materials.

Information in this document is current as of October 6, 2017. No further updates will be provided. For the latest information on Zika, please visit www.cdc.gov/Zika.

Updated information is in blue.

CONTENTS

New and updated information highlighted



Last updated October 6, 2017
Available at: https://www.cdc.gov/zika/pdfs/zika-key-messages.pdf

Improving communication

- Conducted research to evaluate understandability and usability of formal guidance and public materials, as well as preferred channels for health communication and information seeking
- Evaluated web usability to determine if guidance could be easily found
- Used evidence-based recommendations to make improvements

EXAMPLE: Preconception & Sexual Transmission Guidance Message Testing with HCPs in the US and Puerto Rico

- Evaluated levels of agreeability with guidance being informative, understandable, and from a trustworthy source
- Evaluated HCP confidence in their ability to implement guidance with their patients
- Collected suggestions for improving formatting of guidance to make it more user friendly

Zika by the Numbers

>2,200*	Communication products cleared
426*	Scientific products cleared
32,559	CDC-INFO inquiries answered
>120	CDC infographics and factsheets published
7,552	Social media posts
>3.6B	Total Twitter reach
>23M	Total Facebook reach
>90M	Cumulative views on the Zika website
50	MMWR early releases published

As of September 20, 2017; *As of September 29, 2017

Moving forward

Planning for next time

- Zika research and guidance may help responses for future outbreaks
  - Advancements in vector control
  - Personal prevention practices and attitudes
- Need to maintain and build on relationships with state and local health departments to ensure new guidance continues to be effectively communicated and implemented
- Digital first considerations
  - Allows for faster dissemination, immediate feedback, and timely updating

Help us support you as we prepare for next time

- What worked or was helpful to you?
- What missed the mark?
- What was missing?
- What could we consider for next time?
- How could we communicate about new or updated guidance better?

Questions?

Victoria Carter: yez7@cdc.gov

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 www.cdc.gov

COMMUNICATING EMERGING INFORMATION AND CHANGING GUIDANCE

Meredith Li-Vollmer,PhD
Risk Communication Specialist

Public Health
Seattle & King County

ZIKA: AN EMERGING SITUATION

PUBLIC HEALTH INSIDER

OFFICIAL INSIGHTS FROM PUBLIC HEALTH – SEATTLE & KING COUNTY STAFF

ZIKA IN KING COUNTY: WHAT IT MEANS AND WHO SHOULD BE CONCERNED

Meredith Li-Vollmer *Edit*

Blood tests confirmed the first case of Zika virus in King County today in a man in his forties who had recently been in Colombia. This is the third case of Zika virus in the state of Washington, all found in people who became infected while in countries that have current Zika outbreaks. We caught up with Dr. Jeff Duchin, King County Health Officer, to find out what this means for people who live here.

Were you surprised that we've gone this long without having a case of Zika in our county?

JD: Yes, it was a little surprising, given the amount of international travel that passes through SeaTac. With ongoing widespread outbreaks in the Americas and the Caribbean including Puerto Rico, there have been over 400 Zika cases among travelers visiting or returning to the mainland United States. I expect that those numbers will continue to grow, including here in King County. And because many Zika cases are mild or without symptoms, there are likely more cases than get reported everywhere.

Could Zika spread from this one case to the wider public through local mosquitoes?

No, Zika cases in returning travelers to King County do not pose a risk of community Zika spread locally. The kind of mosquitoes that can transmit Zika virus (from the species *Aedes aegypti* and *Aedes albopictus*) aren't found in the Pacific Northwest. Even if a local mosquito bit someone who is infected, they wouldn't pass the Zika virus.

What about through sexual transmission?

Zika virus can be spread from a recently infected man through sexual contact. This case and all men who test positive for Zika infection are counseled about

YOU ARE FOLLOWING THIS BLOG

You are following this blog (manage).

Customize Ed

ANTICIPATE CHANGING GUIDANCE

- **Clarify what you know, what you don't know**

"For example, we don't know why some infected pregnant women have babies that are healthy and others have babies with birth defects."

- **Forecast potential for change**

"So far, only men have been shown to spread Zika through sexual transmission…"

- **Explain why we don't know yet (share the dilemmas)**

ZIKA VIRUS, ONE YEAR LATER

Meredith Li-Vollmer *2 Comments* *Edit*

It's been just over a year since King County had its first diagnosed case of Zika virus infection. We caught up with medical epidemiologist Dr. Meagan Kay, DVM, to find out what we've learned about Zika virus since then, and what concerns health experts have now.

At this time last year, Meagan, you were expecting a child yourself. What concerns did you have about Zika when you were pregnant?

Information was just starting to emerge about the risk of Zika to pregnant women and their babies. As a public health professional, I was alarmed about the early reports of microcephaly in some Zika-infected newborns and what it would mean for families. Microcephaly is a birth defect resulting in an abnormally small head. Babies with microcephaly often have smaller brains that might not have developed properly.

I knew my personal risk in Washington state was low because we don't have the mosquito that can transmit Zika here, but it did affect where I chose to go for vacation. My husband and I love international travel, but I knew I could prevent a Zika infection if we avoided those countries where Zika was circulating. It just wasn't worth the risk of becoming infected and potentially having a miscarriage or poor outcome for my baby.

Have there been any cases among pregnant women, and what have been the outcomes for their babies?

Yes, we've had thousands of people diagnosed with Zika virus infection in the U.S. in the past year, and over 1,845 have occurred in pregnant women. In 2016, about **1 in 10** pregnant women with confirmed Zika

NORMALIZE CHANGING GUIDANCE

KING COUNTY CASE PART OF NATIONAL E.COLI OUTBREAK LINKED TO I.M. HEALTHY BRAND SOYNUT BUTTER

Carley Thompson *Edit*

UPDATE (3/16/17):

A second child in King County was hospitalized for *E. coli* (STEC) O157:H7 linked to eating I.M. Healthy brand SoyNut Butter. The child is now recovering and has been discharged from the hospital.

On March 10, 2017, The SoyNut Butter Company expanded its recall of SoyNut Butter products to include Dixie Diner's Club brand Carb Not Beanit Butter. The Centers for Disease Control and Prevention (CDC) recommends that consumers do not eat, and childcare centers, schools, and other institutions do not serve, any variety or size of I.M. Healthy brand SoyNut Butter, I.M. Healthy brand granola, or Dixie Diner's Club brand Carb Not Beanit Butter, regardless of the date of purchase or the date listed on the container.

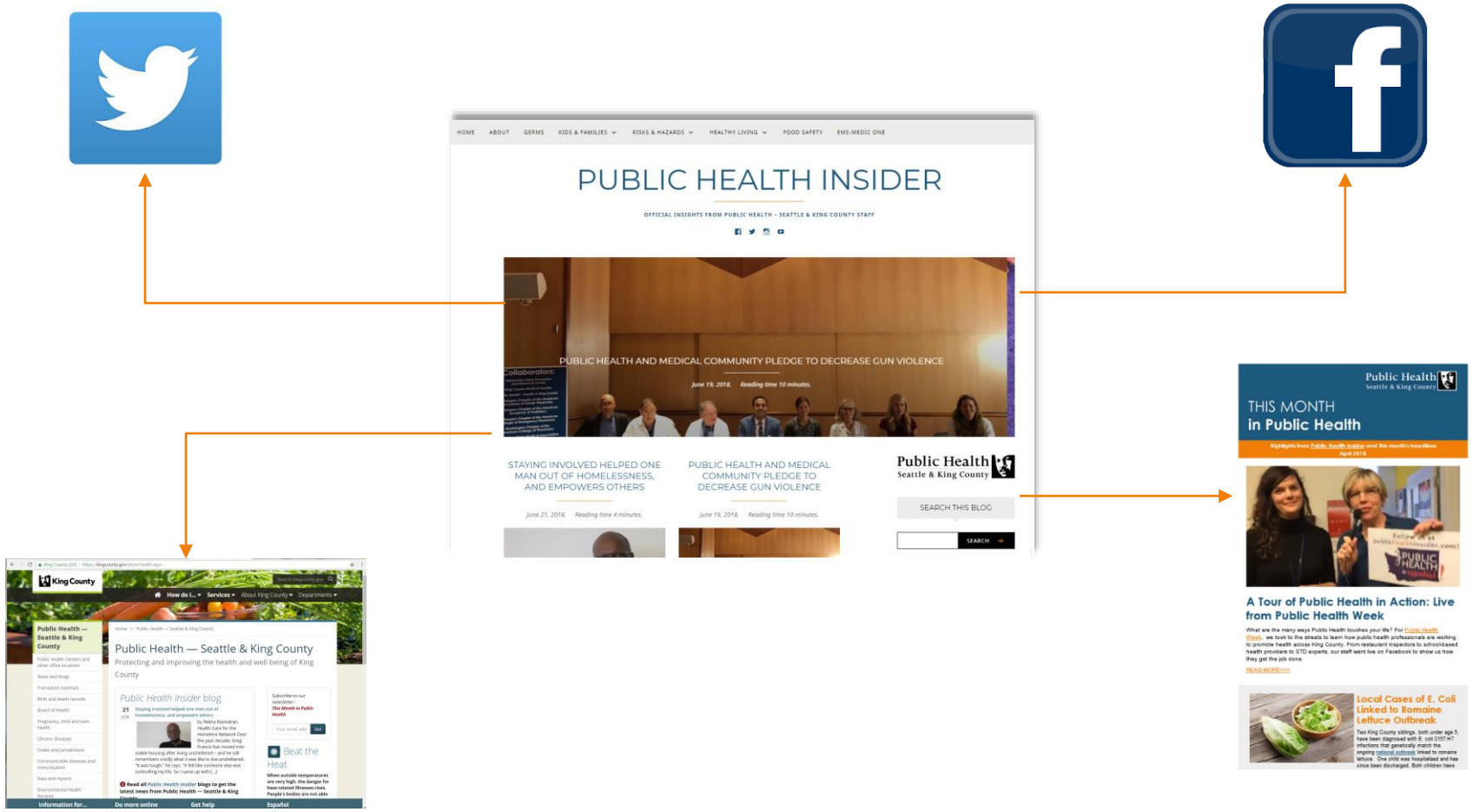
Original post (3/7/17):

A King County child is currently hospitalized with an *E.coli* infection that is part of a national outbreak of Shiga toxin-producing *E. coli* (STEC) O157:H7 linked to I.M. Healthy brand SoyNut Butter. As of March 7,

A WORD ABOUT BLOGGING…

Allows for updates and emerging information

BECOME THE NEWS SOURCE



SOMETIMES YOU DON’T SEE CHANGES COMING…

Jessie Robillard is the manager at Roberto’s Pizza and Pasta on Mercer Island. It’s one of many restaurants ordered to close on Thursday after E. coli was found again in the community’s water. (Mark Harrison / The Seattle Times)

ROBUST COMMUNICATIONS NETWORKS ARE KEY

News release

Social media retweets!

Schools and childcare

Coordinated messages from response partners: city, utilities, state department of health, emergency managers

Restaurant inspectors (boots on the ground)

Community Communications Network

MAINTAINING CREDIBILITY, EVEN WHEN BACKTRACKING

From local news coverage:

"Experts said it is challenging to trace and locate the source of the contamination, describing it as a puzzle. The city is flushing water mains and continuing to take samples. Seattle Public Utilities has tested water in other areas but determined the problem is isolated to Mercer Island."

WHAT TO DO WHEN YOU ARE ISSUED A

BOIL WATER ORDER

Public Health
Seattle & King County

A **Boil Water Order** is issued when bacteria or other organisms that may be harmful are found in the water supply. All food establishments must do the following during a boil water order.

1 Stop Operations

- This means: Stop all food service until the order is removed
- Including: cooking, food preparation, and washing

2 During the Boil Water Order

- Hand washing
  - Wash hands with soap and warm water for 20 seconds
  - Dry hands with clean paper towels
  - After washing, use hand sanitizer
- Throw away all fresh produce that was washed
- Report any illnesses to Public Health **206-296-4774**

3 After the Order is Removed

- Flush all water lines for 5 minutes
- Wash, rinse, and sanitize food contact surfaces and sinks
- Empty and flush ice makers, clean and sanitize inside, and discard the first batch of ice
- Drain beverage machines and flush water lines
- Run dishwashers empty for at least two cycles
- Wash, rinse and sanitize all utensils, cups and plates

4 Re-Opening

Contact Public Health for re-opening inspection/approval: **206-263-9566**

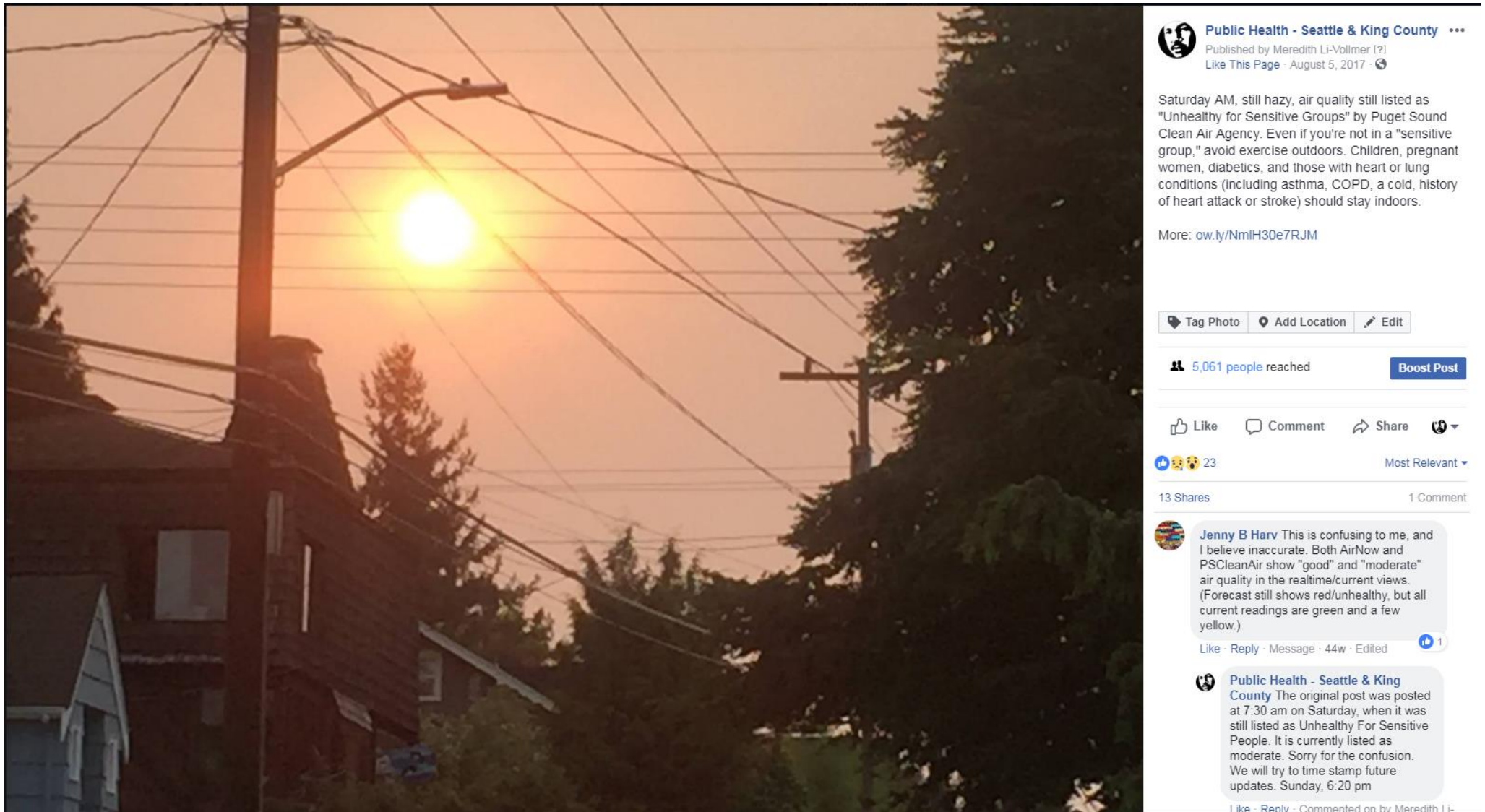
See other side for detailed instructions.

LEAN FORWARD

Predevelop messages as much as possible

WILDFIRE SMOKE

WHAT WE DIDN’T ANTICIPATE



OUR APPROACH MOVING FORWARD

- Forecast potential for changing information: “Check updates frequently.”
- Point to other credible sources.
- Coordinate with partners on messaging.

KEY RISK COMMUNICATION PRINCIPLES

- Timeliness
- Transparency and openness
- Consistency

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Discussion

NACCHO
National Association of County & City Health Officials

Please enter your
questions or comments in to the
Q&A box

NACCHO
National Association of County & City Health Officials

Thank you for joining us!

Contact us with questions

Email: infectiousdiseases@naccho.org