Communicating Public Health Alerts and Guidance with Technical Audiences during a Public Health Emergency

Inclusion of electronic messaging channels (e.g., email) is recommended as part of state, local, tribal, and territorial (SLTT) public health agencies’ multipronged approach for communicating public health alerts and guidance to technical audiences in preparation for and in response to public health emergencies.

The practice should be accompanied by targeted monitoring and evaluation or conducted in the context of research when feasible so as to improve the evidence base for strategies used to communicate public health alerts and guidance to technical audiences.

Finding Statements and Certainty of Evidence

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<thead>
<tr>
<th>Finding statement</th>
<th>Certainty</th>
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<tbody>
<tr>
<td>Electronic messaging systems such as email, fax and text messaging are effective</td>
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<td>communication channels for increasing technical audiences’ awareness of public</td>
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<td>health alerts and guidance during a public health emergency</td>
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<td>Electronic messaging systems are effective communication channels for increasing</td>
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<td>technical audiences’ use of current public health guidance during a public health</td>
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Implementation Guidance

- Engage technical audiences in the development of communication plans, protocols, and channels.
- Consider contextual factors, such as the level of uncertainty or urgency, cultural preferences, and stakeholders’ technical capabilities in the selection of communication channels.
- Establish vetting processes in advance of public health emergencies and coordinate with response partners on messaging to prevent information overload, duplication of effort, and conflicting recommendations.
- Reduce message volume when feasible, and highlight new information and any differences from previous or other existing guidance.
- Develop distribution lists in advance of public health emergencies, and ensure that contact information is kept up to date.
- Consider designating liaisons and institutional points of contact and leverage existing networks (e.g., medical societies and associations) to facilitate broad message dissemination.

Context Considerations

Setting
Settings reflected in this evidence review included a mix of US and non-US settings.

Population
Technical audiences reflected in this evidence review were primarily health care professionals.

Emergency phase
Included a mix of preparedness and response phase studies.

Emergency type
Emergencies were primarily infectious disease events.

Type of communication channel
The type of communication channel reflected in this evidence review was primarily electronic messaging systems (e.g., fax, email, text). Social media is a notable gap area.