



Public Health Case Studies



Case 2

Communicating during a public health emergency

In [*Ethics and Ebola: Public Health Planning and Response*](#), the Bioethics Commission emphasized the importance of effective public health communication and real-time integration of ethics expertise in public health emergencies, in addition to early planning. This case study illustrates how public health professionals consider and address ethics and public health communication as a major outbreak unfolds.

Case Scenario

Some western African countries are experiencing an ongoing epidemic of the Ebola virus disease (EVD), a hemorrhagic fever. Several persons traveling from affected countries to the United States have been diagnosed with EVD after they arrived in the United States. While political and public health officials at the national level are considering a ban on travel from the affected countries, the city health department where you work is busy with local concerns about the outbreak. Your city is home to a large community of immigrants from the affected countries, and you and your colleagues have been receiving calls from anxious members of the public asking what the health department is doing to protect the local residents from contracting EVD. Members of the press also have been asking questions about the department's response plan. Since the city has not had a case of the disease, the department has not yet issued a media statement about its proposed response.

Several days after the most recent EVD case is diagnosed in another U.S. city, the health department received a report of a patient admitted to a local hospital with symptoms that might indicate he has the disease. The hospital lab confirmed that the patient, who recently returned the United States after traveling to one of the affected countries, has EVD.

The health department immediately issues a quarantine order for members of the patient's household and others who have had physical contact with him. As the Public Information Officer (PIO) for the department, you must draft a press release and talking points for answering questions from the public and the media. The department's incident command officer (ICO) advises you to keep the press release brief and state clearly that



the patient's contacts who are at risk of contracting EVD have been ordered to stay home, and the general public is not at risk. The ICO instructs your team to sound confident when speaking to the public, and reassure them that they will not contract EVD and that the department has no concerns about the disease being spread into the wider community.

Some of your colleagues express concern that the department's proposed message about the risks of EVD spreading might be premature, especially given rapidly changing information and guidance from national public health officials. Your colleagues are worried that the department might lose credibility if the message changes in the near future. Others argue that people do not understand risks and that it is simpler and safer to tell them there is no risk at all. "People are scared," one person says, "and the last thing we should do, as public health officials, is admit they have a reason to be scared. We should calm people down, not make them panic." Additionally, members of the team who have ties to the city's immigrant community raise questions about the message the department is sending to this community. Others are worried that those who have been quarantined might not understand why they have to stay home.

Case Analysis

This case raises a number of considerations with ethical dimensions including, but not limited to:

- Deciding which public health information to communicate to the public, including scientific or other uncertainties, given the level of public anxiety;
- How best to anticipate the public's need for information at different stages of a public health emergency, and how to convey accurate information effectively;
- Communicating reasons for public health decisions so that they are meaningful and accessible to affected persons; and
- Using effective communication strategies to mitigate or counter stigma and discrimination that can arise from public health measures targeted at individuals or groups within a community.

In *Ethics and Ebola: Public Health Planning and Response (Ethics and Ebola)*, the Bioethics Commission considered some of these challenges with respect to the global and domestic public health response efforts to the Ebola epidemic in western Africa (*Ethics*



and Ebola, pp. 17-19). When cases of Ebola emerged in the United States in fall 2014, public health officials sometimes struggled to convey the low risk of individual and community transmission in this country, while others downplayed uncertainties in an effort to reassure nervous health care professionals and the public. The following Bioethics Commission insights are particularly relevant to consideration of this case:

- Effective public health communication, from both public health officials and the media, serves a number of different goals, including:
 - Increasing transparency and accountability in public health policy,
 - Educating the public about why certain public health measures are necessary,
 - Reducing fear and mistrust, and
 - Anticipating and countering stigmatization of persons associated with a disease or epidemic.

- Recognizing that there is a natural inclination to express confidence when reassuring anxious members of the public, public health institutions and scientists should work with the media to deliver consistent and scientifically grounded messages, which should include candor about uncertainty and the possibility of new evidence.

- Ethics preparedness planning and effective communication are integral components of emergency preparedness and response, rather than additional steps to be taken after policies are identified or implemented. Ethics preparedness includes:
 - Anticipating communications challenges that might arise during an emergency, and
 - Recognizing the ethical responsibility of public health officials to communicate with and educate the public at all stages of emergency planning and response.

- The Bioethics Commission recommended that communication during a public health emergency should serve three interrelated purposes (*Ethics and Ebola*, pp. 17-19), to:
 - Provide the public with actionable, clear, accessible, and accurate information about the response, including what is known and what is not known about actions that communities and individuals can take to protect their health;
 - Provide persons most directly affected by public health policies and programs with an explanation of the values reflected in, and reasoning behind, their implementation; and
 - Mitigate stigmatization and discrimination associated with public health emergencies and public health interventions implemented in response to emergencies.



Questions for Discussion

1. What are some of the different public health values and ethical considerations raised in this case?
2. How might these values be in tension with one another, or with the public health goals and responsibilities of the communications team?
3. What groups have a stake in the situation presented in the case?
4. Are any of the goals and values expressed by the communications team more important than others?
5. What are some ways to formulate a communications plan for this situation that meet more than one goal or reflect multiple values?
6. How should community stakeholders be identified and engaged effectively in the process of communicating important information to the public?
7. What course of action would you recommend, and why?
8. Which values and public health considerations should guide the team in this case? What do you think is ethically most important for the team to communicate to the media and members of the public, and why?
9. Using the communications channels available, how would you communicate the health department's rationale for implementing the quarantine order to the various stakeholders?
10. After the crisis in this case resolves, the health department leadership decides that they need resources in place to deal with the ethical dimensions of future public health emergencies. How might you advise that ethical considerations be integrated into the local health department's work and response processes?
11. After this crisis, local and national journalists reach out to you about how they can work better with the health department in the future to communicate complex scientific and public health information. What proposals might you make?
12. How can public health officials and institutions sustain ongoing public engagement and education in emergency planning and response measures, and in public health more broadly, particularly as a crisis abates and public interest wanes?
13. Imagine that a health department official accidentally reveals erroneous information about the outbreak to local reporters. This bit of information is immediately disseminated and goes viral on social media, causing additional public panic. How would you respond? What action would you take to prevent something like this from happening? What public health values drive your action?



Acknowledgments

We are grateful for the contributions of Dr. Seema Yasmin in the development of the communications case study.

Additional Resources

World Health Organization. (2008). World Health Organization Outbreak Communication Planning Guide. Retrieved July 10, 2015 from:
<http://www.who.int/ihr/elibrary/WHOOutbreakCommsPlanngGuide.pdf>.