

# Toolkit for Health Risk Communicators

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Public Health  
Agency of Canada

Agence de la santé  
publique du Canada

Canada

**TO PROMOTE AND PROTECT THE HEALTH OF CANADIANS THROUGH LEADERSHIP, PARTNERSHIP, INNOVATION AND ACTION IN PUBLIC HEALTH.**

—Public Health Agency of Canada

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**Boîte à outils pour les communicateurs en matière de risques sanitaires**

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## Table of Contents

I.	Preparing a risk communications plan .....	4
	Step 1: Define the context of the risk .....	4
	Step 2: Interest holder mapping .....	4
	Step 3: Determine what and when to communicate .....	4
	Step 4: Purpose and objectives .....	4
	Step 5: Identify roles .....	5
	Step 6: Develop messages .....	5
	Step 7: Clarity, transparency, accessibility and inclusion .....	6
	Step 8: Operationalize .....	6
	Step 9: Evaluation.....	6
II.	Activating your risk communications plan .....	8
	Step 1: Organize assignments and resources.....	8
	Step 2: Prepare messages and obtain approvals.....	8
	Step 3: Media relations .....	9
	Step 4: Communicating on web and social media.....	9
	Web content.....	9
	Social media content .....	10
	Managing mis- and disinformation (MIDI) .....	10
	Step 5: Communicating with populations at increased risk.....	11
III.	Worksheets and checklists.....	12
	Structure of a Risk Communications Plan.....	12
	Risk Context Definition Worksheet.....	13
	Questions for Experts Checklist .....	14
	Interest Holder Mapping Worksheet.....	16
	Interest Holders' Information Needs Worksheet.....	17
	Communicating with Populations at Increased Risk Worksheet.....	19
	Organizing Assignments Checklist.....	21
	First Messages Checklist.....	23
	Risk Perception Assessment Checklist.....	24
	Transparency Checklist .....	26
	Plain Language Checklist .....	27
	Social Media Posts Checklist.....	28

## I. Preparing a risk communications plan

### Step 1: Define the context of the risk

- Use the [Risk Context Definition Worksheet](#) to clearly define the context of the risk for various audiences based on the risk assessment(s), recognize how it may evolve over time, and identify the most appropriate communications approach.
- Use the [Questions for Experts Checklist](#) to identify key questions to ask subject matter experts, such as: What is the risk? Who is at risk? How can individuals protect themselves?

### Step 2: Interest holder mapping

- List interest holders, including those who might be affected by, or have a significant interest in, the process of decision-making about the risk and the implications of those decisions.
- Start with groups and individuals who could be most directly affected by, or exposed to the risks, then those who could be less affected, and so on to those least likely to be directly affected, and the general public.
- Use the [Interest Holder Mapping Worksheet](#) to help you identify interest holders for the health risk at hand.
- Determine interest holders' information needs. Some will be more familiar with the risk than others and some will trust you more than others due to various social and historical factors. Keep this in mind as you use the [Interest holders' Information Needs Worksheet](#). When possible, engage directly with interest holders to identify their needs.

### Step 3: Determine what and when to communicate

- Use the [Risk Perception Assessment Checklist](#) to gauge public risk perceptions of the pathogen, public health measures, vaccination (if relevant), and other issues that may arise.
- The checklist will also help to determine what the main public concerns are and whether there is a safety or an ethical consideration for delaying communication.

### Step 4: Purpose and objectives

- Establish your overall risk communications purpose and specific objectives for various interest holders. Your purpose can be, for example, to encourage people to adopt a behaviour or change one, or to raise public awareness of a risk, in order to inform appropriate action at individual, organizational or community levels.
- Describe the overall risk communications purpose in behavioural terms: *To «do what?» «with whom» «why» and «how».*

- Specific objectives should be stated in S.M.A.R.T. format, i.e. they should be *specific, measurable, achievable, relevant, and time-bound*. For example: “*To enable device users to better assess and manage personal health risks with respect to use of medical device “x” based on new information we have to share about self-protective behaviour and the experiences of other device users.*”
- Develop risk communications objectives for each interest holder: “*As a result of risk communications on this topic, interest holders should be better able to \_\_\_\_\_ , because\_\_\_\_\_ .*”

## Step 5: Identify roles

- Clearly identified roles will facilitate timely risk communications and coordination with partners. Some roles you may want to consider are:
  - a. Internal team in charge of the file: \_\_\_\_\_
  - b. Team lead: \_\_\_\_\_
  - c. Other team members: \_\_\_\_\_
  - d. Approval tree: \_\_\_\_\_
  - e. Subject matter expert contact(s): \_\_\_\_\_
  - f. Creative services contact(s): \_\_\_\_\_
  - g. Social media contact(s): \_\_\_\_\_
  - h. Web contact(s): \_\_\_\_\_
  - i. Marketing contact(s): \_\_\_\_\_
  - j. Other departmental contact(s): \_\_\_\_\_
  - k. Central agency contact(s): \_\_\_\_\_
  - l. Partners in other jurisdictions: \_\_\_\_\_
  - m. Legal contact(s): \_\_\_\_\_

## Step 6: Develop messages

- Convey key information, explain changes from previous messages and update web, social media, and marketing content. Make sure to remove outdated information.
- Explain the reason for changes in guidance if applicable, acknowledge uncertainty, and give actionable guidance.
- Messages should be evidence-based, timely, consistent, transparent, actionable, and communicate the full scope of the situation.
- You can develop “skeleton messages” (templates for media lines, website content, social media posts, etc.), leaving the details blank.
- Some people prefer to only get clear instructions from health organizations, whereas others like to consider how to engage in harm reduction. You can address both groups by segmenting your message into basic information and bottom-line guidance, and additional information.

- Consider that individuals process information more efficiently and remember it easier in groups of three.
- Tailor messages for different interest holders. Consult with them to identify specific objectives and develop effective communication strategies.
- Consider if any legislation or ongoing legal action is related to the issue. Consult with legal when and where appropriate.

## Step 7: Clarity, transparency, accessibility and inclusion

- **Plain language:** Use words your audience can understand. Organize the information clearly, use short words and sentences, convey between 3 and 5 ideas in the key messages, and avoid jargon. Use the [Plain Language Checklist](#) to ensure use of plain language in your risk messages.
- **Transparency:** Risk messages should contextualize the information, explain what is known and what remains uncertain, and describe what action is being taken by public health authorities. Use the [Transparency Checklist](#) to evaluate if your messages are based on transparency.
- **Inclusion and accessibility: Make sure your messages include various populations and are non-discriminatory, and that they comply with accessibility requirements.**

## Step 8: Operationalize

How will the objectives that are identified in Step 4 be actioned in real-life?

- **Tactics:** Detail how messages will be communicated, what platforms will be used, who will say what messages, and what resources are required to implement the plan successfully.
- **Engage:** Work with other jurisdictions and partners to align messaging and reduce redundancies. Utilize prebunking and fact-checking.
- **Assess:** Review the advantages and disadvantages of using social media vs a news release vs a media interview to share specific messages.
- **Identify and adapt:** Review to identify if there are any audiences that are not being reached by current messaging. Adapt to address identified gaps.
- **Respond:** Have the internal mechanisms prepared and able to respond quickly to MIDI when identified, to prevent disinformation actors from controlling the narrative.

## Step 9: Evaluation

Include a robust evaluation component in your risk communications plan. Evaluation should happen as the plan is being executed and after it is completed. Evaluation may include sentiment analysis of media coverage and social media comments, surveys, focus groups, etc. Early evaluation can determine whether changes are needed and implementing them while the plan is being executed.

After the fact evaluation will produce recommendations for future risk communications efforts. Some performance indicators that you may want to consider include:

- Number of web page visits, click-through rates and conversions, time spent on key information pages, bounce rate, etc.
- Media, social media and MIDI monitoring.
- Feedback from reporters and media outlets.
- Media roundtables.
- Tracking of coverage in interest holder and/or trade media.
- Participation in planning meetings and roundtables.
- Qualitative assessments or lessons-learned of focus groups or roundtables.
- Public opinion research, measuring change in risk awareness and knowledge, risk perception, attitudes towards risk prevention, and behaviour.
- Tracking public opinion research trends over time.
- Public health statistics.
- Engagement with social media posts.
- Social media analytics, including video views.
- Number of tip-sheets distributed/downloaded and posters shipped.
- Number of toolkits distributed and/or number of links to your web site distributed by interest holders.

## II. Activating your risk communications plan

### Step 1: Organize assignments and resources

Use the checklist below when activating your plan during a pandemic:

- Bring together all functional areas and partners.
- Create a contact list and establish leads and roles.
- Assign team members specific responsibilities, dividing these assignments based on immediate and ongoing issues. Use the [Organizing Assignments Checklist](#).
- Layout plan for human resources surge capacity and after-hours support. Identify mental health supports.
- Identify financial needs and sources of funds, and initiate contracting processes as required.
- Coordinate with appropriate response partners to address all communications needs.
- Ensure translation is on stand-by, if needed.
- Review and update relevant stakeholder lists.
- Share a heads up and exchange information and messages with stakeholder lists.
- Review and update staff phone and email lists for distribution.
- Initiate focused media and social media monitoring with a regular schedule.
- Send out “Breaking News” communications as needed.
- Ensure appropriate briefings are scheduled, and governance structures to share information and obtain decisions are clear.

### Step 2: Prepare messages and obtain approvals

Coordinate the development and approval of messages within your organization and in other departments, sharing and clearing information within your organization for timely release. This will enhance consistency and reduce rumours and misinformation. Use the checklist below when preparing risk messages:

- Conduct an environmental scan to understand the context in which the risk is developing.
- Contact Subject Matter Experts for evidence-based information. Use the [Questions for Experts Checklist](#).
- Review and update the [Interest Holder Mapping Worksheet](#) and [Interest Holder’s Information Needs Worksheet](#).
- Identify existing communications products that could be relevant.
- Determine who needs to review, provide input into and approve your messages.
- Prepare holding social media posts, prepare to share interest holders’ posts, if appropriate
- Use the [First Messages checklist](#) to help you craft your initial messages.

- Make sure your messages are brief, clear, build self-efficacy (what people should do to protect themselves), and acknowledge uncertainty.
- Be specific and transparent about what you want to communicate. Don't shy away from the topic.
- Avoid unnecessary details, such as broad context, citing legislation, referring to previous risk events. Focus on the risk at hand.
- Preserve the brevity and clarity of your message as it goes through the approval process, focusing only on factual information.
- Check your messages for use of plain language ([Plain Language Checklist](#)), inclusion, accessibility, and transparency ([Transparency Checklist](#)).

### Step 3: Media relations

- During pandemics, news media will turn to you for information, and you need to provide it quickly and transparently.
- Be prepared to answer questions on the pathogen, the risk it poses, and your jurisdiction's pandemic response.
- Be proactive: do not wait to get media inquiries before you communicate about the risk.
- Communicate with journalists early and frequently.
- Identify English, French, and Indigenous languages media spokespersons, as needed (such as Inuktitut).
- Prepare media lines, Q&As and fact sheets, and other products as required.
- Create a list of media contacts.
- Determine how often you will communicate with the media (episodic vs intervals) and how that might scale up or down depending on event triggers.
- Develop an approved holding message or media lines that are evergreen and do not require re-approval for each request. Ensure they remain accurate and up to date.

### Step 4: Communicating on web and social media

Risk messages on social media and websites should be posted as soon as the information is verified. They should clearly state what the risk is, who is at risk, and risk preventive and harm reduction measures. Furthermore, it is not enough to tell people how to reduce a risk (e.g., get vaccinated), it is also necessary to explain why people should take the public health recommendations you are outlining for them, how the preventive measure works, and how long/how often you expect them to do it.

#### Web content

- Clearly identify and promote your website, emphasizing that it is official, to facilitate people accessing it instead of clone websites. Use online and offline tactics.

- Adhere to your jurisdiction’s or organization’s communications and digital policies, directives, standards and guidelines.
- Write in plain language.
- Apply accessibility standards.
- Ensure your website is mobile-friendly, user-centric and easily accessible.
- Reflect diversity and inclusion.
- Be aware of misinformation and prebunk and fact-check whenever possible.
- Be culturally sensitive.
- Consider the main target sector/audience and tailor language to that sector/audience to support understanding on a certain topic (e.g., human health, animal health, environmental health)

## Social media content

- Use the [Social Media Posts Checklist](#) for best practices for communicating risks on social media.
- Tailor messages to the audience and the channel on which they are published.
- Develop messages that are short, in plain language, factual, and include clear instructions.
- Include links for more information.
- Include the necessary accessibility features.
- Include visual elements to reinforce key messages.
- Be aware of misinformation and prebunk and fact-check whenever possible.
- Hashtags can be used to add your posts to ongoing conversations on social media. If appropriate hashtags related to your topic are trending, using them can bolster the reach of your content and will make it available to anyone searching that term, e.g., #VaccinesWork.
- Assess AI-generated misinformation content and other disinformation and, if necessary, respond as soon as possible.

## Managing mis- and disinformation (MIDI)

In planning a pandemic response, it will be important to develop a strategy for managing MIDI and determining the resources and capabilities needed to execute the strategy. While it is impossible to address all MIDI, health organizations should aim to address the content that could potentially cause harm. The World Health Organization (WHO) developed an operational [toolkit](#) for managing MIDI during health emergencies that focuses on five phases:

1. **Signal detection:** Identify potential outbreaks of false information.
2. **Signal verification:** Gather additional information and evidence to determine whether the signal represents real and accurate information or if they are false or misleading.
3. **Risk assessment:** Determine if the signal warrants a response.
4. **Response design:** Identify target audience, define goals and objectives, identify and engage stakeholders and partners, develop a rapid response outline, develop response messages,

determine dissemination channels, create response materials, test and refine response, monitor and evaluate, learn and enhance the response.

5. **Outreach:** Engage the audience and promote behaviours that support the intended public health outcomes.

MIDI is present in media, social media and in offline discussions. It should be considered at all steps.

## Step 5: Communicating with populations at increased risk

There are many different audiences, even within what we would consider the general population and sub-populations. Along with wider demographic categories, such as age, socio-economic status, educational level, as well as ethnic and religious background, we also need to consider intersecting factors influencing risk perceptions, information needs, values and information-seeking behaviours within those groups. Additionally, we need to consider populations that face health inequities and discrimination due to their sexual orientation, socio-economic status, and experiences of systemic racism and settler colonialism. **Accessing potentially life-saving messages is an equity issue.** Use the [Communicating with Populations at Increased Risk Worksheet](#) to help you with this task.

Recognize that populations at increased risk experience MIDI and are at risk of being targeted by disinformation actors looking to sow distrust.

## III. Worksheets and checklists

### Structure of a Risk Communications Plan

- A. Introduction**
  - a. Purpose and scope of the Plan
- B. Background on the risk**
  - a. What is the risk? Who is directly and indirectly affected by it?
- C. Purpose of the risk communications effort**
- D. Specific objectives**
- E. Roles and responsibilities**
- F. Audience profile**
  - a. How audience information was gathered
  - b. Key audience characteristics
- G. Public environment analysis and MIDI review**
  - a. Environmental scan
  - b. Media/social media monitoring
  - c. Public opinion research
- H. Risk communications strategies**
  - a. Key messages and distribution channels
  - b. Subsequent messages
  - c. Tailored messages
  - d. Web posts
  - e. Social media posts
  - f. Marketing and/or public education activities
- I. Evaluation strategies**
- J. Schedule for implementation of communications plan and resources**
- K. Approvals and Contacts**
  - a. Approval tree
  - b. Internal contact lists
  - c. Partner and collaborator contact lists
  - d. Media contact lists
  - e. Other interest holders contact list
- L. Sign-off page**

## Risk Context Definition Worksheet

<p><b>1. What is the risk context?</b></p>	<p>What is the risk to the public or the individual? Who is at greatest risk? Consult the risk assessment done by the Public Health Agency of Canada if one is available. What are the connections between human, animal and environmental risk in the current situation?</p>
<p><b>2. How is the risk perceived by the public and those at greater risk?</b></p>	<p>Which stakeholders are or perceive themselves to be at high risk of exposure and/or of severe illness? Is the perceived risk higher/lower than the actual risk? If so, why?</p> <p>Is there potential or evidence that misinformation and/or disinformation are influencing risk perception?</p> <p>Are there potential communications partners within those communities or populations?</p>
<p><b>3. What are we doing to manage the risk?</b></p>	<p>What is our role in relation to the roles of others on this issue? What other actions might we take on this issue?</p> <p>What have we already communicated about the risk, what are we going to communicate next?</p>
<p><b>4. What information do people need to make an informed decision to protect themselves?</b></p>	<p>Do we have this information? What is our advice to the public? Is the advice needed ours to give? If not ours, whose is it? Do we have information channels necessary to quickly reach those at risk? What are other authorities/organizations saying publicly?</p> <p>Disinformation can exaggerate or downplay risks, leading to inappropriate public responses. Is there misinformation on this issue in the public realm? Who is the source?</p>
<p><b>5. What is uncertain about the issue and what do we know about it?</b></p>	<p>What are we doing to address that uncertainty? Would communicating the uncertain or incomplete information we have help people protect themselves from the risk? Why would we not communicate it?</p>

## Questions for Experts Checklist

<input type="checkbox"/>	What is the current situation? What is the risk management decision to be made?
<input type="checkbox"/>	What is the nature of the risk? What health risk(s) are we addressing? Which sectors are impacted by the risk (human, animal, environmental) and should be considered in risk communications approach?
<input type="checkbox"/>	How and when did concerns about this issue arise?
<input type="checkbox"/>	Are there certain people or groups/organizations driving this issue? If so, who are they and what might their objectives be?
<input type="checkbox"/>	What is the state of the evidence on this issue? Is there research predating this health crisis? Is their scientific consensus surrounding this issue or is the evidence mixed? Is the evidence evolving? Are we expecting any breakthroughs in this area (vaccines, therapeutics, etc.)?
<input type="checkbox"/>	With respect to uncertainty: <ul style="list-style-type: none"> <li>a. What risks are we certain about and how certain are we? Why are we certain — what is the evidence?</li> <li>b. What is less certain? Are we acting in recognition or acknowledgement of these uncertainties? If so, how do we justify such action?</li> <li>c. What is still uncertain? What efforts are required and/or are underway to address these uncertainties? When will we have more information?</li> </ul>
<input type="checkbox"/>	Who is most at risk and why? (including which One Health sectors?)
<input type="checkbox"/>	Are there any risk prevention/reduction measures (personal protection measures, public health measures, etc.)? What is the evidence behind these recommendations? Why are we recommending those actions?
<input type="checkbox"/>	Is action urgently required to protect public health, animal health, or the environment? If so, what is the evidence behind these recommendations? Why are we recommending those actions?
<input type="checkbox"/>	What “bottom line” conclusions do we want people in Canada to reach when the government’s risk assessment and decision is made public? <ul style="list-style-type: none"> <li>a. Should people living in Canada take protective action or measures to minimize the risks involved?</li> </ul>

	b. If so, how will these conclusions help them to make the well-informed decisions needed to do so?
<input type="checkbox"/>	What narratives (true or false) are circulating about this issue? Are there known misinformation or disinformation campaigns related to this topic? What are the most common misconceptions or false beliefs?
<input type="checkbox"/>	What other factors have been/will be considered as part of the risk assessment? For example, the social, technological, political and economic impacts.
<input type="checkbox"/>	How are/will these factors being considered in decision-making about appropriate risk management and risk communications on this risk issue?

## Interest Holder Mapping Worksheet

1. Who might be directly affected? Who is indirectly affected? Consider human, animal and environmental health partners.
2. In what ways are they affected (benefits and risks: Who might gain and what? Who might lose/be at risk and what might they lose?)?
3. What individuals and groups might have an interest in the topic and/or the risks and impacts associated with it? (social, technological, economic, political, health, environmental)
4. Are there any disadvantaged populations directly or indirectly affected? If so, who are they and what specific needs might they have?
5. For each of the priority stakeholders identified, based on current understanding of their interest and priorities, complete the following table using the guiding questions.

<b>Guiding questions</b>	<b>Priority interest holder #1 (name)</b>	<b>Priority interest holder #2 (name)</b>	<b>Priority interest holder #3 (name)</b>
What do they know now about the topic/risk that is correct? How do we know?			
What don't they know that is consequential? How do we know?			
What might they misunderstand? How do we know?			
What might they want to know? How do we know?			
Who do they trust, and why? How do we know?			
What do they value? How can we identify shared values and frame messages around them?			
What communication methods do they prefer? How do we know?			

## Interest Holders' Information Needs Worksheet

1. Who are the audiences? Who has been affected by this event?  
Who is concerned? Who needs to be alerted?

2. What are each audience's risk perceptions, values, and backgrounds?

3. What are their immediate and long-term information needs and wants?

4. What do media professionals want to know? How do they wish to receive this information?

5. How can the organization express appropriate empathy?

6. What are the facts? What happened?

7. What is the organization's stance on the issue? Are there policies or values that are relevant to this issue?

8. What is your organization doing? How is it solving the problem?

9. What other agencies and departments are involved and what are they saying?

10. What actions should the public be taking?

11. What public information is available and when will more information become available?

## Communicating with Populations at Increased Risk Worksheet

1. Who are the minority groups at direct or indirect risk? Name the group and describe their level of risk. If possible, describe how they may be distinctly experiencing the situation and possible reasons for their distinct experience compared to the majority population.

2. For each population identified above, what should they know? (i.e., what is the information you want them to have?)

3. Who are the Indigenous organizations, First Nations communities and leadership, community associations, professional organizations, religious leaders, immigrant/refugee groups, partner tables, animal or environmental health sectors, etc., that you should connect with that have trusted relationships with the groups at greater risk? Who is their main contact? Are there regional differences?

Organization: \_\_\_\_\_

Address/phone number/email/website: \_\_\_\_\_

Name of contact person: \_\_\_\_\_

Title: \_\_\_\_\_

Contact information: \_\_\_\_\_

4. How do members of these communities communicate? Do they have instant messaging groups (e.g., WhatsApp, Telegram, Messenger, etc.), newsletters, events, community newspapers?

5. Questions for community stakeholders, leaders, and collaborators:

Is the community aware of the risk?

Is the community aware of how to protect themselves?

- Are there specific information needs?
- Is our message culturally sensitive? Can they offer suggestions?
- Are there historical and/or systemic issues that may influence risk perceptions, as well as risk messaging and approaches?
- Are there any rumours, myths and/or misinformation circulating in the community?
- Would the community be receptive to risk messages from the government?
- What languages are spoken by the community?
- How can different age groups be reached?
- Would their organization help with distributing the risk message to the community? (e.g., on instant messaging platforms).
- Would they be open to periodical meetings to keep risk communicators appraised of risk perceptions and information needs in the community?
- What MIDI is present in the community?

## Organizing Assignments Checklist

<b>A. Immediate issues:</b>	
<input type="checkbox"/>	Determine who is managing the event from an operations, programmatic, and scientific perspective.
<input type="checkbox"/>	Consider how the communications team coordinates with the program staff in charge of managing the crisis. What meetings should communications staff attend?
<input type="checkbox"/>	What are the crisis communications sub-teams (i.e., media, Web, strategic, partner, stakeholder, and support) required? Are they operational?
<input type="checkbox"/>	What are the current, most pressing priorities?
<input type="checkbox"/>	What resources are needed? Is staffing sufficient?
<input type="checkbox"/>	Who is the spokesperson for this event and what support might they need (i.e., SMEs as additional spokespersons, additional briefing or training, cultural liaisons)?
<input type="checkbox"/>	Will communications staff be expected to travel? If so, are personal protective equipment or props needed for demonstrations?
<input type="checkbox"/>	Are supplemental funds needed?
<input type="checkbox"/>	Is contractor or other support needed?
<b>B. Ongoing organizational issues:</b>	
<input type="checkbox"/>	What is the potential for the emergency to get worse?
<input type="checkbox"/>	Will events result in more intense public or media interest?
<input type="checkbox"/>	Have rumours or points of conflict emerged?
<input type="checkbox"/>	How should the organization respond to these issues? Is there a current response and is it adequate?
<input type="checkbox"/>	Should the organization continue to be a source of information to the media about this crisis?
<input type="checkbox"/>	Would some issues be more appropriately addressed by other groups or agencies?
<input type="checkbox"/>	Are the teams operating effectively?
<input type="checkbox"/>	Is the approval process operating efficiently?
<input type="checkbox"/>	Are resources sufficient? Should staff resources be reallocated?
<input type="checkbox"/>	Are daily or weekly subject matter expert briefings appropriate to reduce the demand for one-on-one interviews with these experts? Is there a plan to scale frequency up or down as the situation evolves?

<input type="checkbox"/>	Should personnel who have been temporarily assigned to the crisis be returned to normal duties?
<input type="checkbox"/>	Should hours of operation be increased or reduced?
<input type="checkbox"/>	Are supplemental funds needed for public awareness activities or other?
<input type="checkbox"/>	What is the organization learning from the public and the media that could be useful to outbreak investigators and policy managers?
<input type="checkbox"/>	Is there personnel assigned to monitoring social media and answering questions (after consulting with experts) posted by individuals?
<b>C. Partner involvement in both immediate and long-term issues</b>	
<input type="checkbox"/>	Who are the partner organizations (traditional and emergent) of this event including One Health partners? Have they been briefed? Are they concerned about their own reputations?
<input type="checkbox"/>	Which partners are or should be involved in the response? How can coordination occur?
<input type="checkbox"/>	Can a partnership improve the response? If so, who and how will you engage them?
<input type="checkbox"/>	Do partners wish to get involved in the response? If so, who and how?

## First Messages Checklist

<input type="checkbox"/>	What is the risk?
<input type="checkbox"/>	Is the risk being contained?
<input type="checkbox"/>	Am I safe? How can I protect my family?
<input type="checkbox"/>	What have you found out that my family and I should know about?
<input type="checkbox"/>	What is the nature of the risk and how did it emerge? What are you doing to stop it or mitigate its impact?
<input type="checkbox"/>	Who is in charge?
<input type="checkbox"/>	How are those affected or at increased risk of exposure or severe illness being assisted? How can I access that assistance?
<input type="checkbox"/>	Why did this happen? (Don't speculate. Repeat the facts of the event, describe the data collection effort, and describe treatment.)
<input type="checkbox"/>	Did you know ahead of time that this might happen? Why wasn't this kept from happening (again)?
<input type="checkbox"/>	What else can go wrong? (Don't speculate, only if you know.)
<input type="checkbox"/>	When did you begin working on this (were notified of this, determined this)?
<input type="checkbox"/>	What do these data (information, results) mean?
<input type="checkbox"/>	What bad things aren't you telling us? (Don't forget the good.)
<input type="checkbox"/>	What remains unknown and what are you doing to reduce uncertainty?
<input type="checkbox"/>	How do we know we can trust you?
<input type="checkbox"/>	Why should we trust you instead of an influencer, podcaster, or politician?
<input type="checkbox"/>	When will you provide an update?

## Risk Perception Assessment Checklist

This is a subjective tool. In general, the more questions you check off “yes”, the higher the anticipated level of public risk perception. This checklist can also help determine what issues people are more concerned about (e.g., are children and pregnant people at risk?), and what aspects of the risk need to be addressed (e.g., if the risk is caused by human action then addressing this will most likely be a priority).

1. Does there appear to be a high level of public interest in this issue currently?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Have there been any media calls on this (or a related) issue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Has there been media coverage on this issue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. Has there been significant social media activity on this (or any related) issue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
5. Has there been a significant spike in public enquiries on the issue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6. Are advocacy groups/NGOs communicating on this issue now, or in the recent past? If yes, consider which ones and what they are saying.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
7. Is it likely that this will become an issue of concern to the public?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8. Is this likely to become political?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
9. Is the risk linked to an upcoming event (e.g., a specific holiday/time of year)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
10. Is the risk linked, or perceived to be linked, to an emerging issue?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11. Does the perceived risk affect many individuals/regions of the country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12. Has the issue been addressed by any domestic organizations or jurisdictions in public, animal or environmental health?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
13. Has this issue been addressed or discussed publicly in other countries, or by international organizations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

14. Does the issue have any characteristics likely to heighten risk perception?	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
15. Is the perceived risk thought to affect children or infants?	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
16. Is the perceived risk thought to affect other at-risk groups? (e.g., pregnant people, immunocompromised, elderly, etc.)?	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
17. Is the perceived risk thought to affect underserved populations? (e.g., Indigenous communities, new immigrants, racial minorities, etc.)	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
18. Is the perceived risk of a particularly dreaded nature? (e.g., death or serious injury)	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
19. Is there something that has occurred recently that would impact people's trust in our communications?	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
20. Is the perceived risk originating from a man-made source? (e.g., drugs, nuclear)	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
21. In the past, did the risk, or a similar risk, have a high profile?	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No
22. Does the origin of the perceived risk have low levels of public trust?	<input type="checkbox"/>	Yes
	<input type="checkbox"/>	No

## Transparency Checklist

<input type="checkbox"/>	Is the message clearly explaining what the risk is?
<input type="checkbox"/>	Is the message clearly identifying populations at direct and indirect risk?
<input type="checkbox"/>	Are we properly contextualizing the magnitude of the risk? (Avoid terminology that is subject to interpretation)
<input type="checkbox"/>	Are we stating clearly what is currently known and not known?
<input type="checkbox"/>	Are we explaining what measures are being taken to reduce uncertainty and when we can expect to have more information?
<input type="checkbox"/>	Are we explaining what evidence was used to justify decisions?
<input type="checkbox"/>	Is the message unduly optimistic? Are we overly reassuring?
<input type="checkbox"/>	Is there any other valuable information we should include or concerns we are not addressing?
<input type="checkbox"/>	Is the message consistent with previous messages? If not, are we explaining the reasons behind the changes?
<input type="checkbox"/>	Is there MIDI circulating? Does our message address it?

## Plain Language Checklist

<input type="checkbox"/>	Address the audience directly.
<input type="checkbox"/>	List information in order of importance.
<input type="checkbox"/>	Use active voice.
<input type="checkbox"/>	Use short, simple words, sentences and paragraphs.
<input type="checkbox"/>	Remove all technical jargon. If not possible, provide a clear definition for every technical term.
<input type="checkbox"/>	Do not change verbs into nouns.
<input type="checkbox"/>	Use positive sentence constructions (what to do) rather than negative constructions (they can be harder to understand for people whose first language isn't English or French).
<input type="checkbox"/>	Use appropriate comparisons (as risky as [similar risk], risk is higher/lower than [similar risk]).
<input type="checkbox"/>	List instructions in the order they should be carried out.
<input type="checkbox"/>	For print and web: List important points separate from the text.
<input type="checkbox"/>	List items in a parallel form (using the same grammatical form for every item).
<input type="checkbox"/>	Test what you write and seek feedback.
<input type="checkbox"/>	Say what you have to say and nothing more (precision and concision).

## Social Media Posts Checklist

<input type="checkbox"/>	Post as soon as information becomes available.
<input type="checkbox"/>	Address the reader directly; use a conversational tone.
<input type="checkbox"/>	List key messages in order of importance.
<input type="checkbox"/>	Use plain language and clear calls to action/advice.
<input type="checkbox"/>	Always include a link to more information.
<input type="checkbox"/>	Express compassion and empathy.
<input type="checkbox"/>	Use appropriate images or video to highlight risk, mitigation measures or target audience.
<input type="checkbox"/>	Use relevant hashtags (#).
<input type="checkbox"/>	Monitor conversation.
<input type="checkbox"/>	Assess MIDI and determine need to prebunk/debunk. In doing so, speak directly and use scientific evidence.
<input type="checkbox"/>	Be consistent with previous messages and partners' messages. Explain changes in guidance as needed.
<input type="checkbox"/>	Share related content from other Departments or from interest holders.
<input type="checkbox"/>	Engage your partners and interest holders to collaborate in amplifying your messages and to amplify their own messages.