

Communicating About COVID-19

By Kirk St.Amant

The COVID-19 pandemic is prompting communication professionals to examine ways they might help their communities. As the pandemic unfolds, the question becomes: How can communication professionals meaningfully intervene in this crisis? There are, of course, concrete and needed offers of help in the form of making needed supplies, like masks, and in coordinating local activities, like food drop off and pick up.

A key problem, however, remains: The growing, and, in some locations, already catastrophic strain on local healthcare systems as increasing numbers of individuals seek care. This is an area in which communication professionals can make important contributions.

One missing and needed resource is informational materials that help address local situations. The objective is to reduce the demand on communities by providing informational and instructional materials for understanding the COVID-19 crisis. This is where communication professionals can make an important difference.

The materials needed fall into the following categories:

Instructions on Identifying COVID-19 Symptoms

Fear fueled by lack of knowledge can drive large numbers of individuals to emergency rooms, urgent care centers, clinics, and other healthcare environments. This influx of patients puts increasing strain onto many of the over-extended local healthcare systems. It also puts a growing numbers of individuals into a waiting area context where they can more easily catch the disease. These non-symptomatic individuals are more likely to be released to return home, and if they acquired COVID-19 during their visit, they can spread the illness to previously uninfected members of their family.

The solution is for communication professionals to provide local healthcare services with easy-to-disseminate informational materials on how to determine if one might have COVID-19. Such materials need to be written to address the expectations and needs of local communities (vs., re-distributing materials by national agencies – materials designed for a more general audience). They also need to address two audiences:

- Individuals who wish to assess their own health by performing a diagnostic on themselves
- Individuals who care for others – children or the elderly – and are reviewing the health of another

Such instructions need to note

- What to look for to determine if one might have COVID-19
- What to do if one does seem to display symptoms of COVID-19
- How to monitor one's condition if a COVID-19 infection is suspected, but not all symptoms are present
- How to continue to monitor one's health (and how often) if one seems healthy at the moment
- How to seek care (e.g., visit an emergency room) to reduce potentially infecting one's household if a COVID-19 infection is suspected

The objective is helping individuals understand when to seek care for a COVID-19 concern and when they should, instead, engage in supportive self-care at home. Ideally, such materials can help ease the strain on local healthcare systems by reducing the number of individuals seeking care.

Strategies for Shopping Strategically

Fear can cause a run on grocery stores and can prompt individuals to hoard resources to the point where it creates a strain on others. Much of this hoarding behavior is driven by misperceptions of what is needed to effectively feed a household in times of crisis.

Often, this panicked purchasing can lead to the buying out of seemingly non-essential resources. (How many have seen crisis situations where all of the bread and milk disappears from a store, but ample supplies of water, canned goods, and batteries remain?) These situations can strain immediate local situations (e.g., fights breaking out in stores over resources), tensions in communities (e.g., individuals feeling neighbors are hoarding or not sharing), and even affect local health (e.g., depriving individuals of needed dietary resources or even essential medications).

The solution communication professionals can provide comes from informational materials associated with shopping and cooking. These would include the following items:

- Checklists of what to purchase so individuals have readymade shopping lists they can use to put information into action when implementing ideas about how to shop. Such lists should include both food types (e.g., canned beans) and quantity based on servings per person (e.g., 2 cans per person per week). An entry might look like “Canned beans: 2 cans per person per week.”
- Recipe lists explaining how to use the items collected via the shopping list to create multiple meals during the week. For example, one could note how to cook rice (don’t assume users will know how to prepare food you’ve suggested they purchase) as well as how to integrate that cooked rice into multiple meals throughout the week (e.g., rice and beans, stir fry, chili, etc.). Such information should note how much of a given meal to prepare per person (e.g., “For 1 person, use these measurements when preparing this meal. Increase these numbers proportionally per person in the household.”) The better individuals understand how to use groceries in a way that meets weekly dietary requirements, the less likely individuals are to panic and over-purchase items for fear of not knowing what they will need.
- Shopping schedules that provide a framework for how and when to use shopping lists. Such schedules might be a calendar noting which day of the week to designate as “shopping day” with tentative entries noting when to prepare different meals described in the associated recipes provided. Such a schedule can help individuals better conceptualize their food needs during a week and, ideally, reduce panic shopping or overbuying driven by fear that one will not have enough food to last during a certain timeframe.

Materials like these reduce strain on local resources, reduce social tensions, and limit social contact by reducing multiple trips to the store -- and multiple social interactions -- during a timeframe.

Protocols for Assessing Sources of Information

Inaccurate information can be one of the greatest threats to social stability in times of crisis. It can prompt rushes on healthcare services, lead to strains on local infrastructure, and increase tensions among individuals. The problem is we live in an age of interconnection and continual information where

it is often difficult to tell accurate information from specious sources or sincere mistakes. Given how easy it can be to forward part of a message (information out of context), share a misperception of information, or even create false content, the risks of prospective problems are high.

For communication professionals, addressing this issue involves a two-part process of

- Providing individuals with rubrics for assessing the sources of COVID-19 information in terms of its accuracy. These rubrics can apply to information in general (e.g., “Review the source of information. Is it stated? Is it one associated with understanding this area and providing information on the situation?”) They should also, however, address common media – particularly social media – where updates can come quickly and continually (e.g., “To determine if a Facebook post is legitimate, research the background of the person posting or sharing it. Who is this person, and what is their background in relation to the topic?”). Such simple steps can help individuals review content more critically to hopefully reduce misinformation passing as credible content that can lead to panic.
- Presenting strategies for how to report misinformation or false content. It is one thing for the individual to avoid acting on inaccurate content. It is another to get such content flagged or removed to prevent others from acting on it. Protocols on assessing content should also include instructions on how to report problematic content to the organization sharing this information. Such situations can be particularly important in relation to social media providers that allow almost anyone access to vast audiences on a seemingly limitless basis. Taking steps to help remove misinformation from these channels and block purveyors of false content on them is essential to helping avoid greater public panic and preserving health and safety.

Accurate information is key to managing a crisis, and communication professionals can play an important role in making sure individuals understand how to discern accurate from problematic content in critical times.

Procedures on How to Care for Others

A growing number of individuals now cares for other parties – aging family members, ailing neighbors, and nearby grandchildren. For these individuals, the challenge is one of determining whether they ought to stay home or venture out to provide needed care. These individuals need resources that can both help them make key decisions and allow them to maintain regular contact with the person for whom they provide different kinds of care.

Communication professionals can help meet these needs by developing certain materials including

- Instructions on how to venture out safely to interact with, watch over, or provide care for other parties. Such instructions would include how to maintain one’s safety when traveling to and from the other party’s location as well as how to maintain social distancing when in the presence of these individuals. They would also include instructions on how to assess the health of the persons for whom they provide care to determine if those persons seem ill or may be infected, and if so, how to monitor and follow up on such concerns – including how to request medical assistance if infection seems likely. Such instructions should note how one should clean their hands, clothes, and other materials upon returning to their own home in order to avoid spreading infection within the caregiver’s household.

- Rubrics for determining how often to visit another person directly or if it is possible to do “check ins” by other means. If, for example, one’s daily visit to an elderly parent is to see if that person is doing OK or if they have enough food or other items for daily wellbeing, such activities can be done via non-contact options, such as phone calls. In other cases, the need to see the other party might be essential to assessing their wellness. In such cases, free-access technologies like Skype, Google Hangouts, or Zoom may suffice. Knowing if and when one should do caregiving visits in person is a matter of knowing what one needs to do during such visits and what other options might be available if on-site interactions are not essential. Rubrics that can help caregivers better assess if such meetings are needed, and alternatives for doing regular check ins can help care providers maintain both the health of those they care for as well as that of their own household.

In some instances, interactions outside of the home are necessary. By providing individuals with materials that can help them assess options and address situations, communication professionals can help individuals make better decisions that address health challenges during a crisis.

Instructions on How to Interact Virtually

The COVID-19 pandemic has seen what is perhaps the largest global move ever to online interaction. From businesses to schools to religious meetings, almost every aspect of our society is now conducting daily activities online. Such transitions can be difficult when undertaken by employers or institutions that provide the technologies for and the staff to facilitate such interactions. These factors, however, do not help individuals who need to engage with others outside of pre-arranged online contexts.

These individuals need instructions on how to engage in three core activities associated with interacting with others online in order to

- Determine what kind of interaction they wish to engage in and then select the technology best suited for these interaction. To this end, easy-to-use rubrics that align kinds of communication (need) with associated technologies that facilitate it (solution) can be invaluable. Communication professionals can assemble tables or rubrics that help individuals identify the technologies best suited for their purpose (e.g., “Daily quick/5-minute check in with family members. Skype: Allows visual and audio interaction as well as text chats and the ability to share screens to exchange information quickly across multiple senses.”) Included in such resources should be pricing options – particularly what is free vs. what is for fee – and associated benefits and limitations of such options (e.g., “The free version of Zoom limits the amount of time individuals can be connected on a meeting; the paid version removes this time restriction.”). This information can help individuals make better choices for their off-site interactions.
- Download and install the selected technology as familiarity with requisite technologies varies widely. Instructions on how to perform these processes can be essential to successfully using them. Consider, for example, the person who has never used their mobile phone to download a program like Skype, FaceTime, or Zoom. Would they be able to intuitively perform this process? Alternatively, if a family member had to talk them through the download and installation process, could they do so from memory and via guesswork? In such situations, these instructions can be invaluable by saving time and effort and reducing the frustration of these processes – all factors that influence if individuals will actually use a technology later vs. be so disenchanted with it due to an unpleasant download and install experience they instead avoid it.

By creating such instructions, communication professionals can facilitate the move to online interactions by helping others install the technologies needed to do so.

- Use the technology to interact with others as one cannot assume use of these technologies is intuitive. In such cases, the need is for instructions on how to use the related technology after it has been downloaded. These instructions might need to include information on how to set up an account and log into it once created. They likely also need to note how to use the technology to share information via different channels (e.g., how to do audio chats; video chats; text messaging, etc.). Such instructions also need to be presented in a way – be it in writing, infographics, or instructional videos – that allows individuals themselves to use a technology or allows another party, like a family member, to talk them through such processes. By creating such materials, communication professionals can provide members of their communities with the information needed to interact effectively via online communication technologies.

Seemingly simple, informational materials like these can be the key to maintaining social distancing while preserving important interpersonal relationships in times of crisis. The more easily individuals learn to use such technologies, the more likely they are to use them, and virtual interactions reduce the need for face-to-face engagement and allow for more manageable social distancing in times of crisis.

Implementing Ideas

As communication professionals create such materials, they need to consider the following factors:

- Understanding the audiences who will use these materials, and creating versions that address audience expectations and needs. For many of these items, there is no single, distinct “user group.” Rather, age, education, literacy rates, and familiarity with technology all affect what individuals need from and how they will use these materials. For this reason, communication professionals need to determine who the audiences in their communities are that will likely need or use such materials and create alternate versions for each audience. Identifying these audiences might involve contacting local healthcare providers, community services, or local organizations to determine who these populations are. The key is that the final items produced need to clearly indicate the local community audience for whom they are designed to insure the correct individuals use materials.
- Developing materials for distribution via multiple modes. While many individuals might assume, “Just put it on a website and everyone can access it.” that situation might not reflect local realities. Certain individuals might shun online resources and instead prefer printed materials. For this reason, communication professionals need to create materials that can appear on websites, be accessed by mobile devices, and be printed while appearing in similar formats across media types. This parallelism is critical for situations in which individuals might be discussing a common item (e.g., instructions on how to install software) but be using different media as a point of reference (e.g., the printed vs the mobile version of instructions). Parallel design makes such interactions easier by creating common points of reference for discussion (e.g., “Look at the second bullet item under “Heading 1: Installation.”). A similar situation would be the case should one decide to use online videos to provide information. In such cases, the video should be divided into titled segments that parallel other versions to allow for common reference points for discussing information.

- Coordinating with local organizations – including healthcare, public, non-profit, and other entities – to share information about these resources to make community members aware of them. Information is only effective if it is used, and individuals can only use it if they are aware it exists and know how to find it. By coordinating with local agencies, communication professionals can make sure members of the community are aware of these resources so they can use them. Included in this coordination needs to be a plan for who will share news of these materials across different platforms and resources (e.g., I'll post it to the hospital's Facebook site, but you'll post it to the hospital's twitter account.) to avoid overwhelming individuals with information in ways that could undercut its credibility and deter others from using it.

By addressing such factors, communication professionals can make meaningful contributions to their local communities. Such contributions can be essential to helping both local communities and greater society in times of crisis, such as the COVID-19 pandemic and beyond. Challenges to public health and social wellbeing will continue to arise, and they will always need to be addressed on local levels. Strategies such as these can help communication professionals make meaningful contributions to their communities when threats to public safety arise.

Acknowledgements: The author wishes to thank Cathryn Molloy and Cynthia Ryan for their help in developing these ideas and crafting this text. Their input was central to crafting many of the strategies noted here.