National Risk Communication Strategic Plan For Public Health Emergencies, Sri Lanka (2023-2025)

Health Promotion Bureau
Ministry of Health, Sri Lanka

NATIONAL RISK COMMUNICATION STRATEGIC PLAN FOR PUBLIC HEALTH EMERGENCIES, SRI LANKA

2023-2025

Health Promotion Bureau

Ministry of Health

2023

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List of abbreviations

AAP	Accountability to Affected Populations
CBRN	Chemical, Biological, Radiological and Nuclear
CBO	Community-Based Organizations
CSO	Civil Society Organizations
DPRD	Disaster Preparedness and Response Division
HPB	Health Promotion Bureau
IHR	International Health Regulations
JEE	Joint External Evaluation
M and E	Monitoring and Evaluation
MoH	Ministry of Health
MOH	Medical Officer of Health
NBRO	National Building Research Organization
NGOs	Non-Governmental Organizations
PDHS	Provincial Director of Health Services
PIP	Pandemic Influenza Preparedness
RCCE	Risk Communication and Community Engagement
RDHS	Regional Director of Health Services
SEAR	South East Asia Region
SOP	Standards of Procedure
SPAR	State Party Self-Assessment Annual Reporting
TAC	Technical Advisory Committee
TOR	Terms Of Reference
UN	United Nations
WHO	World Health Organization

FOREWORD

The National Strategic Risk Communication Plan for Public Health Emergencies, Sri Lanka, is developed by the Health Promotion Bureau, the focal point for risk communication in the Ministry of Health. The necessity of such a plan was witnessed in recent years with the occurrence of diverse global and national public health emergencies. This plan has been developed to reach the highest possible standards relevant to risk communication for Sri Lanka, by meeting stipulated criteria of two of the tools of the International Health Regulation (IHR) monitoring and evaluation system, the State Party Self-Assessment Annual Reporting (SPAR) tool, and the Joint External Evaluation (JEE) tool.

Risk communication is proven to be a critical tool in emergency preparedness and response. Thus, a strategic plan to address all facets of risk communication to mitigate communication negative impacts surrounding public health risk and emergency situations is a timely need. Much groundwork in risk communication has already occurred in Sri Lanka, with steep escalation during the COVID-19 pandemic. However, further strengthening the system through streamlining risk communication and establishing formal communication guidelines and procedures between diverse stakeholders is expected with the implementation of this plan. This plan will be reviewed and revised as necessary at the end of two years, in keeping with the dynamic nature of risk communication.

Relevant stakeholders inclusive of development partners have contributed to this plan and their contribution is gratefully acknowledged. This plan will be a joint venture in which ownership for success rests with well planned, coordinated and timely risk communication and community engagement occurring within a strong risk communication system geared to collectively face and overcome challenges.

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Health Promotion Bureau   Ministry of Health

2023   Sri Lanka

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INTRODUCTION

The WHO South-East Asia Region is particularly vulnerable to both geophysical and biological hazards, with over 900 disasters recorded in the past decade, or an average of one natural or man-made disaster every four days (1). Such emergencies have caused tens of thousands of deaths, and economic losses totaling billions of dollars. Sri Lanka has faced several geophysical and biological hazards and disasters in the last two decades together with the COVID-19 pandemic. As a nation, Sri Lanka has surmounted many such risk and emergency situations of a diverse range, ranging from the 2004 tsunami and 2016 Aranayake landslide to the COVID-19 pandemic with much resilience, due to a strong health system and a risk communication system greatly strengthened in the face of many health challenges in recent years. Risk Communication is an extremely important component of risk and emergency mitigation and management. More work to further strengthen and improve awareness on risk communication, including generating greater awareness on its role in every sector, inclusive of sectors outside health is needed in Sri Lanka.

Risk communication refers to "the exchange of real-time information, advice and opinion between experts and people facing threats to their health, economic or social well-being, ultimately enabling affected people to make informed decisions to protect themselves and their dependents"(1).
Risk communication informs the public about risks so that they can take informed decisions about preventive and protective behaviours and take timely and proactive measures to mitigate the risk. Risk communication is not merely a one-way communication of risks to the public, but a two-way communication in which the views of the public are actively listened to, acknowledged and responded to. Risk communication is an integral component of public health risk management which is focused on dialogue with those affected and concerned, which strives to ensure evidence-based communication strategies (2). Risk communication is a core capacity of the International Health Regulations (IHR) 2005 and also features prominently in the Pandemic Influenza Preparedness (PIP) framework.

Effective risk communication improves risk perception by affected populations and enables them to make informed decisions which lead to prevent or mitigate effects of the hazard. Four risk communication strategies are outlined by Peter Sandman, an internationally renowned expert on risk communication, whereby strategy is dependent on both the actual risk and public perception of risk.

Successful risk communication can catalyze the initiation and continuation of a social movement resulting in social engagement towards the prevention or mitigation of a certain hazard and its effects. Therefore, to fulfill this task, multi-sectoral collaboration with relevant stakeholders in disciplines such as health and sectors outside health such as disaster management, defense and environment agencies is essential. Effective risk communication also dispels myths, rumours, unnecessary panic and agitation in situations where the actual hazard does not warrant the level of outrage or emotional response sometimes unduly elicited.

In disaster or hazard situations with potentially high perceived risk, fear and outrage are more prominent, with increased dependency on government and other relevant authorities. On the other hand, in a disaster situation government and other authorities are also in a difficult situation in managing and allocating resources for the affected, while continuing routine governance. Hence, it is important to empower communities to make informed decisions in critical situations through proper risk communication (3). This will aid mitigation of adverse effects of hazard and emergency situations through responsible, proactive measures taken by communities, who will see themselves as important partners in ensuring their own safety and wellbeing. Recognition that it is not only action by authorities, but collective effort by all which will minimize negative impacts of hazards, emergencies and disasters, can be brought about by effective risk communication. WHO has recognized that active involvement of affected people is a core to emergency preparedness and mitigation.

The duration and frequency of exposure to risk and resilience of the community for a specific type of disaster is also an important factor that needs consideration in risk communication. Recurrent or prolonged risk exposure can alter the risk perception from the absolute potential risk (4). An information vacuum is also created in disaster situations highlighting the need for rapid, reliable communication and strong networking. Communication gaps could result in the dissemination of unreliable information, rumours, misinformation and disinformation through social media and other unverified information channels. Thus, an increased need for real time verified information is clear in these situations. Harnessing community networks, all forms of media and other communication channels for timely dissemination of accurate information could be optimized through a strategic and coordinated risk communication plan.

Why a risk communication strategic plan?

- A risk communication strategic plan is an essential component of a strong and resilient risk communication system for any country. System strengthening needs to be prioritized for managing risk, emergency and disaster situations. This is the first Sri Lankan national strategic plan for risk communication for public health emergencies.

- In accordance with the International Health Regulations Monitoring and Evaluation Framework, two of the tools are used in assessment {State Party Self-Assessment Annual Reporting (SPAR) tool and the Joint External Evaluation (JEE) tool}. This present plan will be reviewed at national level every 2 years. The first national review is planned for the last quarter of 2025, following the plan being in implementation from October 2023 - October 2025, with further improvement of risk communication and community engagement strategies.

- While risk communication does occur at many levels, in different sectors, for a wide range of identified issues, partnership and collaboration needs to be optimized and risk communication and community engagement must be streamlined and brought to a common platform, for Sri Lanka to enjoy the complete benefit of all efforts and resources earmarked for risk communication, especially for public health emergencies.

- Many organizations within and outside the health sector communicate on risk and emergency preparedness and response in times of public health emergencies. Collaboration can be improved through this plan to optimize utilization of precious resources. Planned collaboration will minimize the duplication and issuing of mixed, confusing contradictory messaging, which can occur without proper co-ordination within and between sectors in crisis situations.

- Enabling timely dissemination and reach of critically important action messages to the most vulnerable at-risk populations can be ensured through building and sustaining a strong risk communication network at national and subnational levels, with communities at grassroot level also being equal partners. Strong networking in accordance with this plan will aid timely receipt of critical risk communication by the most vulnerable pockets who are sometimes difficult to reach through traditional pathways.

- To ensure that all persons are aware of the relevant responsible agency/ body to reach out for information and support in risk, emergency and disaster situations relevant to health.

- To develop and build capacities of local communities to proactively engage in risk and emergency mitigation which will respond urgently and positively to health messaging through strong community engagement in crisis situations.

- To facilitate "herd behaviours" conducive to risk mitigation through following optimal behaviours learned by example from "champions" or community leaders in emergency and risk situations.

- Implementation of risk communication activities will be streamlined and greatly strengthened with a national risk communication strategic plan in place.

Scope of the National Risk Communication Strategic Plan

The National Risk Communication Strategic Plan for Sri Lanka has been developed in line with the Regional Risk Communication Strategy for Public Health Emergencies in the WHO South East Asia region. Thus, the areas focused in this plan are principally concerned with communicable diseases, epidemic and pandemic prevention and control and disaster and emergency preparedness, in line with common public health emergencies.

Strengthening risk communication relevant to areas such as Chemical, Biological, Radiological and Nuclear (CBRN) emergencies in Sri Lanka, will also be strengthened with this plan, through development of guidelines and Standards of Procedure (SOP) for such communication. This is an important area of focus, which is sometimes overlooked considering that such emergencies are usually uncommon. Communication in other areas where risk situations and emergencies are uncommon or given sub-optimal attention will also be facilitated through SOPs developed in implementing this plan.

The National Risk Communication Strategic Plan presents the national strategic goals, objectives, activities and the ways to achieve them within the defined time frame (5).

Link between South East Asian Regional Risk Communication and Emergency Preparedness Plan and Sri Lankan Risk Communication Strategic Plan

WHO supports member states to develop national risk communication plans, Standard Operating Procedures (SOP) and to build capacity ensuring that mechanisms in place at the regional, national and local levels are consistent. It also recognizes that each member state is unique and national risk communication plans will need to take the specific needs of that member state into consideration.

Previous emergencies both within and outside the region have pointed to the criticality of the five pillars of effective risk communication and community engagement. These five pillars form the basis of the International Health Regulations (IHR) 2005 external evaluation for countries. They are: 1. Risk communication system 2. Internal and partner coordination 3. Public communication for emergencies 4. Communication engagement with affected communities 5. Addressing perceptions, risky behaviours and misinformation. Sri Lanka plan also follows this guidance.

Structure of the Sri Lankan Risk Communication Strategic Plan

The plan is structured on four key strategic objectives, based on priority communication areas seen to be most relevant to Sri Lanka and the South East Asia region. These objectives use as their foundation, the five key pillars of risk communication.

Five pillars of risk communication

Risk communication system

For effective risk communication there should be an established risk communication system consisting of a dedicated national risk communication unit with dedicated staff assigned for specialized tasks, with dedicated budget allocation. Having a focal point in risk communication is an advantage in emergency situations. The risk communication system also includes relevant stakeholders and technical entities for smooth functioning in emergency response.

Internal and partner coordination

Throughout the disaster cycle, to maintain the risk communication system at its optimum efficiency, internal and external communication is essential. Furthermore, coordination between relevant stakeholders and partners also gives an opportunity to identify the gaps of the system and fine tune accordingly.

Public communication

Effective communication is an essential public health capability which can empower affected communities to mitigate the effects of the hazard or disaster, achieve speedy recovery and improve the resilience within the community. In hazard and emergency situations, information dynamics is very important. Hence, understanding the context specific information need with effective risk communication to address those needs, reduces unwarranted panic and rumors (6).

Engagement with affected communities

Due to the physical and psychological instability and vulnerability of affected communities during emergencies and disasters, engagement with affected communities should be done empathically and credibly, respecting social, cultural and other dynamics of communities (3). Systematic consultation, communication and involvement with affected people is crucial to initiate, stop or change a specific behaviour. Also, community engagement should aim to include, encourage and enable stakeholders to respond to risks by adapting communication to prevailing local political, economic, social, cultural and psychological conditions.

Rumor management

Due to changes in information dynamics, there is potential for rumor generation during an emergency period. Rumors can affect the perceived risk of the population which can alter context specific appropriate behaviours concerning emergencies. Therefore, tracking, analyzing and responding early to rumors plays a key role in risk communication (7).

Five key risk communication principles reflected in the national plan

1. Trust
2. Transparency
3. Announcing early
4. Listening and
5. Planning

These key principles feature strongly and are reflected in the activities under the strategic objectives of the risk communication plan.

Community engagement in Risk Communication

Community engagement goes hand in hand with risk communication as active community involvement and responsibility, together with ownership is essential to ensure success of risk communication. The goal of community engagement is to empower communities to confidently share leadership, planning & implementation of risk communication throughout the health emergency response.

Current standing of Sri Lanka with regard to risk communication for public health emergencies

1. A focal point for risk communication within the Health Ministry has been identified – the Health Promotion Bureau.

2. A National Risk Communication Strategic Plan for Public Health Emergencies is now available, with the publishing, dissemination and implementation of this plan.

3. There is good collaboration between the Health Ministry and media, which was greatly strengthened during the COVID-19 pandemic, with media conferences being held thrice weekly by the Health Promotion Bureau at the peak of the epidemic. Currently media seminars are held weekly and public health risks and any necessary emergency preparedness is communicated at these.

4. A strong grassroot network in health from national to ground level is available, which has been utilized in the recent past for risk communication, with scope for further strengthening for risk and emergency preparedness communication with the implementation of this plan.

5. There is good collaboration between health and other sectors in national risk, emergency and crisis situations, though this collaboration needs further strengthening and streamlining.

Areas which are expected to be strengthened through this plan

1. Defined responsibilities for staff on risk communication both within and outside the Health Ministry

2. Strengthened and streamlined collaborations with guidelines and standard operating procedures for communication in risk situations and emergency preparedness

3. A dedicated budget for risk communication

Challenges to risk communication and how they could be overcome with this plan

1. Information diversity – communicating information regarding risk situations accurately, transparently and in a timely manner, with uniformity of messages will build trust in the system and strengthen prevention and mitigation of misinformation and disinformation.

2. Multi-stakeholder involvement is a challenge which could be converted to an opportunity with good networking, building trust and rapport between diverse stakeholders. Stakeholders will share ownership and accountability through supportive partnership, transparency and collaboration. Preventing conflicting communication by different stakeholders is important to avoid confusion and breakdown of trust.

3. Trust building – Trust and transparency goes hand in hand and are critical elements of risk communication. A good risk communication strategic plan includes elements which will improve trust and transparency in communication.

Best practices to promote through National Strategic Risk Communication Plan

1. Co-ordination at different levels, with collaboration and ownership by diverse stakeholders.

2. Outreach to communities and engagement of communities, youth, religious leaders and champions.

3. Having social listening systems in place and proactively ready before emergencies.

4. Continuous use of risk communication systems established for COVID-19 response for other public health emergencies.

5. Learning by doing – organized risk communication in health is a relatively new practice. Sharing success stories and analyses as to how risk communication could be further improved and optimized is encouraged.

6. Showcasing successes in risk communication in hazard situations and public health emergencies.

7. Promoting research and an evidence base for best practices in risk communication.

National Risk Communication Strategic Plan for Public Health Emergencies, Sri Lanka (2023 -2025)

General Objective:

To enable successful mitigation of public health crisis and emergency situations in Sri Lanka through risk communication

Specific Objectives:

1. To strengthen risk communication systems and community engagement for health risk public communication in Sri Lanka

2. To strengthen national capacity for proactive and dynamic risk communication

3. To optimize community engagement in risk communication through identifying perceptions, concerns and proactive behaviours

4. To develop inbuilt mechanisms to monitor and evaluate risk communication at all levels island-wide

Specific Objective 1: To strengthen risk communication systems and community engagement for health risk public communication in Sri Lanka

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Strengthen the risk communication system	1.1a Developing a Risk Communication Strategic Plan at national level	Availability of National Risk Communication Strategic Plan for Public Health Emergencies	2023	HPB
	1.1b Linking risk communication strategic plan with other relevant risk communication plans	No. of national-level communication plans identified with which linked		MoH, HPB, External stakeholders relevant to risk situation
		No. of common goals achieved (impacts/outcomes)	2023-2025	
	1.2 Developing a Multi-sectoral guideline for co-ordinating RCCE functions	Availability of SOP/guideline for collaborative risk communication with relevant programmes, campaigns and institutions within and outside the health sector	2023	HPB, DPRD, MoH Ministry of Disaster Management, NBRO, Ministry of Mass Media External stakeholders relevant to risk situation
		Risk communication included in plans of relevant sectors outside health	2023-2025	External stakeholders relevant to risk situation

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Strengthen the risk communication system	1.3 Risk communication being incorporated into provincial, district and divisional level annual action plans	Risk communication a component of provincial, district and divisional annual action plan	2023 – 2025	PDHS RDHS MOOH
	1.4 Conducting regular Technical Advisory Committee (TAC) meetings on Risk Communication at national level	Availability of a TAC on Risk Communication with a TOR at national level, meeting at least once every 2 months	2023	HPB
		% of identified issues addressed nationally	2023 – 2025	MoH External stakeholders relevant to risk situation
	1.5 Local risk issues being identified and addressed by a working group on risk communication with key stakeholders at provincial, district and divisional level	Availability of a working group on risk communication at provincial and district level meeting at least once every 2 months	2023 -2024	PDHS RDHS
		Risk communication network established between provinces, districts and HPB	2023	HPB Health Information Unit, MoH
		% of identified issues addressed locally	2023 -2025	MoH External stakeholders relevant to risk situation

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Strengthen the risk communication system	1.6 Having an Emergency Response Team with at least one risk communication resource member at provincial/district level	Availability of Emergency Response Team with at least one risk communication resource person, at provincial/district level	2023 – 2024	PDHS RDHS
	1.7 Identify spokespersons on risk communication at national, provincial & district levels	Availability of authorized spokespersons on risk communication at national, provincial & district levels	2023-2024	MoH HPB PDHS RDHS
	1.8 Developing Standards of procedure for communicating risk in emergency situations	Availability of guideline/SOP for risk communication during emergency and disaster situations	2023	MoH, HPB Ministry of Disaster Management NBRO Ministry of Defence, External stakeholders relevant to risk situation
	1.9 Identifying logistical and financial resources, strengths and challenges in risk communication and means of overcoming challenges	Availability of a document on logistical and financial resources, strengths, challenges, and means of overcoming challenges	2023-2024	MoH PDHS RDHS UN partners NGOs CSO, CBO

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Strengthen the risk communication system	1.10 Designating resources including funding for risk communication	Availability of resources and funding designated for risk communication	2023-2025	MoH Ministry of Public Administration HPB PDHS RDHS MOOH UN partners CBO External stakeholders relevant to risk situation
	1.11 Developing test systems for risk communication (eg- early warning tsunami system)	Availability of test systems in accordance with SOPs	2023- 2024	Ministry of Disaster Management DPRD
2. Internal and partner communication and co-ordination	2.1 Mapping all relevant internal and external stakeholders, for collaborative, uniform, and timely risk communication at national, provincial and divisional level	Relevant stakeholders are mapped at all levels	2023-2024	Health Information Unit, MoH PDHS, RDHS NBRO, Disaster Management Centre UN partners CSO, CBO

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
2. Internal and partner communication and co-ordination	2.2 Internal partner networking for risk communication including national, provincial, district & divisional levels for regular, quick information sharing	Internal risk communication networks developed at all levels	2023	HPB PDHS RDHS MOH UN partners CBO, CSO Telecommunication companies
	2.3 External partner risk communication networking with relevant external stakeholders at national, provincial, district, divisional levels	External risk communication networks are developed at all levels	2023-2024	Disaster Management Centre NBRO MoH Ministry of Disaster Management, Ministry of Mass Media External stakeholders relevant to risk situation

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
2. Internal and partner communication and co-ordination	2.4 Identifying roles and responsibilities of key stakeholders in risk communication at national and sub-national levels	Specific roles are identified and documented	2023-2024	HPB, MoH PDHS, RDHS Ministry of Disaster Management Disaster Management Centre NBRO External stakeholders relevant to risk situation
3. Public communication	3.1 Identifying feasible and effective communication platforms for risk communication	Feasible and effective communication platforms in risk communication identified for diverse populations	2023-2024	HPB PDHS, RDHS MOOH Academia UN partners CBO, CSO
	3.2 Preparing and pre-testing messages and communication materials for different target audiences with emphasis on information need, social, ethnical and cultural dynamics	Availability of messages and communication materials on risk communication for different target audiences	2023-2025	HPB MoH CBO, CSO UN partners External stakeholders relevant to risk situation

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
3. Public communication	3.3 Conducting field level risk awareness campaigns to improve risk perception	Field-level risk awareness campaigns conducted	2023-2025	HPB PDHS, RDHS Universities Professional Colleges CBO, CSO UN partners
4. Communication engagement with affected communities	4.1 Identifying communication interventions to ensure Accountability to affected populations (AAP)	Availability of a document on measures to ensure AAP	2023 - 2024	MoH, HPB PDHS, RDHS MOOH CBO, CSO UN partners
		Availability of quarterly reports on communications to mitigate risk for affected populations at district level	2024 -2025	RDHS MOOH External stakeholders relevant to risk situation
	4.2 Establishing two-way communication between affected communities and relevant stakeholders through health staff, identified community influencers and community networks, with central level collaboration to disseminate and strengthen risk communication	Availability of platforms for communication between health staff, affected communities and relevant stakeholders, in collaboration with HPB	2023-2024	MOOH CBO, NGO HPB External stakeholders relevant to risk situation

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
4. Communication engagement with affected communities	4.3 Mapping of vulnerable communities and identifying grassroots level officers to liaise with in risk communication	Vulnerable communities identified and mapped	2023-2024	PDHS, RDHS
		Grassroot level officers identified and networking with them done		MOOH UN Partners External stakeholders relevant to risk situation
		Availability of a grassroot level network system with relevant ground level officers, in vulnerable communities		RDHS, MOOH CBO External stakeholders relevant to risk situation
5. Dynamic listening and rumour management	5.1 Identifying mechanisms to identify misinformation, rumours, and myths	Availability of mechanisms to identify misinformation, rumours, and myths	2023	HPB CBO UN Partners External stakeholders relevant to risk situation
	5.2 Strengthen social listening through information channels such as mass media, social media and hotlines.	Availability of dedicated staff for social listening	2023-2025	HPB UN partners

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
5. Dynamic listening and rumour management	5.3 Develop a rumour management mechanism	Availability of a rumour management mechanism	2023-2025	HPB MoH UN partners External stakeholders relevant to risk situation

Specific Objective 2: To strengthen national capacity for proactive and dynamic risk communication

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Advocacy for risk communication	1.1 Developing advocacy tools for effective risk communication	Availability of advocacy tools for risk communication	2023-2024	HPB
	1.2 Advocating to address key issues in risk communication	% of identified issues for which advocacy has been done at national and local levels	2023-2025	MoH, HPB External stakeholders relevant to risk situation
	1.3 Advocating to increase resource and fund allocation for risk communication related activities	Availability of resources and funds for risk communication related activities	2023-2025	MoH, HPB UN partners External stakeholders relevant to risk situation

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
2. Developing capacities in risk communication	2.1 Developing a training module on risk communication for master trainers in healthcare	Availability of a training module on risk communication	2023 -2024	HPB, MoH UN partners
	2.2 Training healthcare staff in risk communication	% Healthcare staff (different categories in public health, relevant curative health staff) trained in risk communication	2023 -2024	HPB, MoH RDHS, MOOH UN partners
	2.3 Training of non-healthcare staff in basic risk communication	No. of sectors outside health trained No. of units outside health trained	2024 -2025	HPB, MoH UN partners External stakeholders relevant to risk situation
	2.4 Conduct and facilitate research on risk communication	Number of research studies conducted relevant to risk communication	2023-2025	Universities Professional Colleges
		Availability of an updated evidence pool on risk communication		HPB, MoH External stakeholders relevant to risk situation

Specific Objective 3: To optimize community engagement in risk communication through identifying perceptions, concerns and proactive behaviours

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Identifying community groups, CSOs and CBOs relevant to risk communication	1.1 Mapping of community groups, CSOs and CBOs related to risk communication	Availability of networks of community groups, CSOs and CBOs related to risk communication in all districts	2023-2024	RDHS, MOOH HPB CBOs UN Partners
2. Identifying community perceptions, concerns and behaviours	2.1 Conducting behaviour surveys related to risk perception	Number of behaviour surveys conducted related to risk perception	2023-2025	HPB, MoH Universities Professional Colleges UN partners External stakeholders relevant to risk situation
	2.2 Analysing challenges in community engagement for risk communication and ways to overcome	Availability of a report on challenges in community engagement for risk communication and ways to overcome	2024	HPB Universities Professional Colleges External stakeholders relevant to risk situation
3. Updating risk communication strategic plan in accordance with social and behaviour research results from communities	3.1 Evidence based updating of risk communication strategic plan	Updated risk communication strategic plan in accordance with results of community studies	2026	HPB Universities CBO UN organizations

Specific Objective 4: To develop inbuilt mechanisms to monitor and evaluate risk communication at all levels island wide

Key strategic areas	Key Activities	Indicators	Time frame	Responsibility
1. Monitoring and evaluation activities being inbuilt into all risk communication activities	1.1 Ensuring that M&E is always integrated into risk communication work/ endeavours	% of risk communication activities evaluated	2023 – 2025	HPB, MoH PDHS, RDHS External stakeholders relevant to risk situation
		Availability of reports on evaluations of Risk Communication activities		
	1.2 Obtaining collaborative resource support for special surveys on risk communication outcomes and impacts for selected objectives	Availability of outcomes/impacts for selected risk communication objectives	2023 -2025	HPB, MoH PDHS, RDHS Universities Professional Colleges UN partners
2. Objectively reviewing risk communication regularly	2.1 Developing a checklist to monitor key Risk Communication indicators	Availability of Monitoring checklist	2023	HPB
	2.2 Conducting a risk communication review at least every 2 years at national and sub-national levels	Risk communication review conducted at least every 2 years	2024 -2025	HPB PDHS, RDHS UN partners
3. Regular review and updating of strategic plans	3.1 Reviewing national strategic risk communication plan	Review of National Risk Communication Strategic Plan every 2 years	2025	HPB, MoH UN Partners External stakeholders relevant to risk situation
	3.2 Using evidence and data gathered in updating the plan	Availability of Evidence based updated Risk communication plan after 2 yearly review	2025 -2026	HPB, MoH UN Partners Relevant external stakeholders

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Annexure I: External Stakeholders

Ministries/ Departments	Ministry of Disaster Management
	Ministry of Environment
	Ministry of Education
	Ministry of Mass media
	Sri Lanka Police- CBRN
	Ministry of Women, Child Affairs & Social Empowerment
	Ministry of Urban Development
	Ministry of Agriculture
	Ministry of Fisheries
	Ministry of Public Administration
	Ministry of Plantation Industries
	Department of Animal Production and Health- Veterinary Research Institute
	Department of irrigation
	Office of the Chief of Defence Staff

- Sri Lanka Army
- Sri Lanka Navy
- Sri Lanka Air Force
- State Intelligence Service
- Department of Coast Guard, Sri Lanka
- General Sir John Kotelawala Defence University
- Defence Services Command and Staff College
- National Cadet Corps
- Civil Security Department
- Department of Multipurpose Development Task Force
- Department of Immigration and Emigration
- Secretariat for Non-Governmental Organizations
- National Disaster Management Council
- Disaster Management Centre
- National Disaster Relief Services Centre
- Department of Meteorology
- National Building Research Organization
- National Authority for the Implementation of Chemical Weapons Convention
- National Dangerous Drugs Control Board

	• Defence Services School • National Security Fund • Defence Research and Development Centre • Sri Lanka Institute of National Defence Studies
Councils/ Authorities/ Organizations	Sri Lanka Atomic Energy Regulatory Council Plantation Human Development Trust (PHDT)-Organization Central Environment Authority (CEA) Marine Environment Protection Authority (MEPA)
Presidential Task Forces	As available
Academia	Universities Professional Colleges
UN partners	WHO UNICEF WFP UNFPA ILO IOM
Other development partners	World Bank Asian Development Bank
Community-Based Organizations (CBO)/ Civil societies/ NGOs and other organizations	

Annexure II: Resource persons at consultative meetings

Dr Susie Perera	DDG/ PHS II
Dr Ranjith Batuwanthudawe	Director/ HPB
Dr Rohan Rathnayaka	Director/ Mental Health
Dr S.Amunugama	Director Health/ PHDT
Dr Lakmini Magodarathna	DD/ Nutrition Division
Dr Indrani Malwenna	DD/ NIHS
Dr Chintha Sooriyaarachchi	DD/ NIID
Dr Amanthi Bandusena	CCP/ HPB
Dr Supun Wijesinghe	CCP/ HPB
Dr Asanthi Fernando	CCP/ HPB
Dr Ajith Alagiyawanne	CCP/ HPB
Dr Uthpala Amarasinghe	CCP/ HPB
Dr Enoka wickramasinghe	CCP/ HPB
Dr Nirosha Ranasinghe	CCD/ HPB
Dr Dilhani Samarasekara	CCP/ Quarantine unit
Dr Chinthana Perera	CCP/ Epidemiology Unit
Dr Nadeeja Herath	CCP/ Estate & Urban Health
Dr Upuli Perera	CCP/ E & OH
Dr A. Senaratne	CCP/ NCD
Prof Sampatha Gunawardhana	Prof. in Community Medicine /
Dr M.A.Suranga	USJP Act. CCP/ Policy Analysis
Dr. Yasara Samarakoon	CCP/ Western Province
Dr Prabhath Ranasinghe	CCP/ Central Province
Dr Manonath Marasinghe	CCP/ Uva Province
Dr. Kasuni Kalubowila	CCP/ Colombo District
Dr Chintha Jayampathy	DCMOH/ CMC
Dr Deshani Herath	Senior Registrar/ HPB
Dr Vidura Jayasinghe	Senior Registrar/ Nutrition Division
Dr Ama Nanayakkara	Senior Registrar/ HPB
Dr N.H Obeyesekera	Registrar/ HPB
Dr Eroma Fernando	Registrar/ HPB
Dr B.M.I.Gunawardhene	Registrar/ HPB
Dr W.M.P.C. Weerasinghe	Registrar/ HPB
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