

Communicating About Risks in the Community

September 9, 2003, 9:30am

Presenters: Clifford Scherer and Bruce Lewenstein

Communicating Risks in the Community **Clifford Scherer**

- It is almost overwhelming to hear the complexities of the problems we're facing — What don't we know? How is human health impacted by changes in ecology, weather systems, and new and reemerging diseases?
- According to a CDC report, the greatest challenge that they face is communication. The public must be involved in process of protecting their own health.

Context:

- Science progresses by disagreement with previous findings.
- Should there be agreement between all experts during emergency before you start talking to the public?

Reasons (not) to communicate:

Should communicate:

- People need info to make decisions
- Mitigation measures
- People can help, apply their skills
- Build foundation of public literacy to avoid panic later
- Build trust
- Provide information about other agencies that can give even more help

Should not communicate:

- Media may misreport
 - Public may react in negative way
 - People may be looking for a negative spin – hidden agenda
 - Protect confidentiality
 - Not enough resources/money
 - Info could change
 - Not their job
 - Perceived interference with other agencies
 - Fear of political fallout
 - Fear of precipitating economic crisis
-
- A fear of failure backs many reasons for not communicating
 - Work with other agencies to make sure they also understand the value of communicating

Sound bite syndrome:

- Prepare to give your own sound bites – refine your message; do not let media select it for you.
- Communicating complex messages – viewers don't recall complexity and details, but that might not be your most important role in communicating as an agency
- People should come away from your message with a positive view of your agency – an emotional memory. Did the viewer trust or like the spokesperson?

Probabilities:

- Difficult to express to nonscientists (even to some scientists).
- How information is stated is important – 1% seen as higher risk than 1 in 100.

Resistance to change:

- Communicate early – frame attitudes, beliefs understanding. Those attitudes and beliefs will then be difficult for public to change.
- Don't wait to release information, even if it's not complete.

Simplification tendency:

- Better for you to simplify, because you understand the complexities, but the public does not necessarily need to know them.

Agenda setting:

- Media tell us what to think about.

Framing:

- Media stories tell you how to think about a subject – what parts of the issue are most important. E.g., emphasis on smallpox was about the risk of vaccination, not risk of smallpox itself.
- Can you help frame in an issue for presentation to the public?

Manipulation of naïve views:

- How information is presented affects how we think about it. Must be prepared for how you will frame an issue in case it arises.

Creation of ambiguity:

- There is a lack of direction in the media about what an event means to one as an individual. Agencies can help fill this void.

Nature of risk:

- The view of health officials vs. public perception — How do you deal with the intersection of these views?

Perceived as high or low risk?

- Forced is perceived to be a higher risk than voluntary.
- Artificial higher risk than natural.

Role and Responsibilities of the Land Grant System in Building Community Strengths to Address Biohazards
September 8-9, 2003, Cornell University, Ithaca, NY

- Dreaded higher than not dreaded (cancer vs. auto accident)
 - Unknowable higher than knowable
 - Controlled by others higher than controlled by self
 - Untrustworthy sources higher than trustworthy
 - Unresponsive higher than responsive
 - Secret higher than open
-
- An agency cannot control the nature of a hazard, but can control trustworthiness, responsiveness, and openness. These three can help public think more rationally about a risk.

Models of Science Literacy and Public Understanding of Science
Bruce Lewenstein

Deficit model

- Assumes that audience can be divided into Attentive vs. Interested vs. Residual Publics
- More knowledge is better
- However, does not address context of knowledge.
- Does it really matter if people can give you correct answers about people not living at the same time as dinosaurs?

Contextual model – “informed deficit model”

- Can't divide people into attentive and residual – more of a gradation: technophiles, confident believers, etc.
- Interests shift depending on community/culture
- Must take into account history, trust – ex communicating health to African Americans, Tuskegee legacy.
- What about communicating in different languages?
- Often removes social context for making risk decisions

Lay knowledge/expertise model

- More than technical issues are relevant
- Chernobyl fallout – local farmers saw problems with MAFF reports, technical experts over generalized. Breakdown of trust. Must bring in community's knowledge.
- Lay model criticized for being anti-science.
- More than just technical issues are important in science – ethics, impact on community, etc.

Public participation model

- How do you achieve this in a large community/country?
 - People may lack technical knowledge that is emphasized in the deficit model
-
- What's the goal of the communication program?
 - Build trust or get info across?
 - How do these models play out in the real world? Lots of learning to do.

Audience Participation

- Level of trust of sources that agencies rely upon, and the info that they pass on. Fraud in science, etc. How do the agencies deal with this?
- The agencies themselves should try to set a tone for communication. Work with other organizations to try to set a more open tone. Eventually resisting agencies will change. Try to check multiple sources, and convey to your audience that there is a debate going on. If you can't provide certainty, you can at least provide trust that you're being open and providing what you know. Science doesn't ever have "the answer." Info changes because science is an ongoing process.

Notes taken by Dan Knapp, edited by Sara Miller