

## EOH FUNDAMENTALS: RISK COMMUNICATION



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### LEARNING OBJECTIVES

After reviewing this document, the reader should be able to:

- State the relevance of risk communication for public health practice and give an example from their own experience
- Describe key principles of risk communication
- Give examples of goals for risk communicators
- Describe a framework for engaging audiences in risk controversies

### WHAT IS RISK COMMUNICATION?

Risk Communication is an evidence-based approach to communicating effectively with the public in times of controversy. When an issue arises that involves risks to health, the environment or the economy, people may be faced with complex information that can be hard to access or understand.

Apparent disagreements between “experts,” use of jargon by spokespeople and concerns about the motives of various interested parties can make it difficult for people to know whom to trust, where to go for credible information and what actions to take to get involved or respond to the issue. This document deals with communicating effectively in non-emergency situations that are of public health importance.

Peter Sandman refers to two categories of non-emergency risk communication:

**Precaution advocacy:** Public health agencies may wish to elevate the profile of a risk, for example, the risk of contracting vaccine-preventable illnesses if people are not vaccinated. The goal in precaution advocacy in public health is to get people to take action on risks they may not be taking seriously enough.

**Outrage management:** People may be angry, upset or outraged about risks, and these reactions may be out of proportion to the severity of the risk. Outrage management techniques are used to reduce fear and outrage and promote dialogue by increasing audience understanding. Public health agencies can reduce outrage and promote an appropriate level of concern by providing clear, credible information, accessible to the public.<sup>1</sup>

## RISK COMMUNICATION IS A CORE COMPETENCY FOR PUBLIC HEALTH

Technical experts must be able to communicate clearly to support risk management decision making by risk managers. There is broad consensus on the need for public health professionals to be able to communicate effectively. For example, the Public Health Agency of Canada identifies communication as a core competency for public health practitioners.<sup>2</sup> Bondy et al. identify oral and written communication skills as core competencies for epidemiologists.<sup>3</sup> Risk communication is identified as part of the competency expected of specialist physicians in public health and preventive medicine as outlined by the [Royal College of Physicians and Surgeons in Canada](#).<sup>4</sup> The Council on Linkages Between Academia and Public Health Practice<sup>5</sup> also identifies communication as a core competency for public health.

### A public health practitioner is able to:

#### Communicate effectively with individuals, families, groups, communities and colleagues.

- Front line provider: Revise oral presentations to meet the needs of various audiences.

#### Interpret information for professional, non-professional and community audiences.

- Front line provider: Develop immunization schedule fact sheets for people with low literacy levels.
- Consultant/specialist: Discuss population health information about health status and demographics with front line providers.

#### Mobilize individuals and communities by using appropriate media, community resources and social marketing techniques.

- Front line provider: Use multiple strategies to effectively communicate health messages appropriate to audiences (e.g., community newspapers, local television, radio, billboards, face-to-face events).
- Manager/supervisor: Use community networks to receive and provide information about issues affecting the health of citizens.

#### Use current technology to communicate effectively.

- Consultant/specialist: Forward workplace health information from a health promotion listserv to staff members on a workplace health committee.<sup>2</sup>

## GOALS FOR COMMUNICATORS

The following communication goals are appropriate in most risk communication situations:

**Increase audience understanding and inform appropriate action:** Some people may have limited technical understanding about a risk issue, and may have received incomplete, confusing or conflicting information. Increased understanding can reduce fear, calm or prevent outrage, and promote dialogue with, and action by interested parties.

**Build credibility over time:** People usually receive information about health risks from multiple sources – friends and family, neighbours, the news media, advocacy or public interest groups, social media feeds and government agencies. Different sources of information may present inconsistent or even conflicting views about the significance of the risk and what should be done about it. The most credible sources are likely to have a greater influence on people’s attitudes and behaviours in relation to the risk issue. The goal of building credibility over time should consider personal, organization, information, and process credibility.

## CORE PRINCIPLES OF RISK COMMUNICATION

To meet the two goals described above, it is helpful to focus on a few core principles:

**Be truthful:** Truthfulness is one of the long-term determinants of credibility. When people learn about an untruthful statement, it can increase outrage, and reduce credibility at all levels (personal, organization, information, and process credibility). Truthfulness includes not making statements that cannot be substantiated and being prepared to admit what is not yet known. Avoid extreme or indefensible comments.

**Be helpful:** Being helpful refers to responding directly to audience concerns using words and other information (diagrams, physical models, math concepts) that are appropriate to the audience. Non-technical language that avoids jargon, acronyms and complex math is most appropriate for non-technical audiences. Many people have difficulty understanding statements about probability (e.g., increased probability of getting cancer) but have a good grasp of outcomes (how many people die from car accidents). It is also helpful to teach people in the learning style that works best for them (visual, auditory, tactile). Communicators must understand their role in effectively responding to concerns, and also be aware that ineffective communication has the potential to aggravate the issue at hand by escalating outrage (outrage management) or apathy (precaution advocacy) through their actions and messages.

**Be clear:** In health or environmental risk controversies, careless use of language can confuse rather than clarify the speaker’s message in the mind of the listener. “Contamination” (e.g., chemicals found at elevated levels in the environment) and “volatile” (referring to chemicals that evaporate easily at room temperature) exemplify words that are very commonly used in reports or conversation about environmental risk, yet provide little clarity of meaning. “Contamination” is nearly always perceived negatively and can usually be replaced with a description of the situation that provides more information without escalating fear and outrage (e.g., lead at elevated levels in the soil). “Volatile” is interpreted differently by people based on their knowledge and experience with the word (could refer to someone with a bad temper or something explosive). In a precaution advocacy context, it is

appropriate to emphasize the need for appropriate action, what the action should be, and the possible consequences of not acting appropriately in response to the risk.

**Be proactive:** It can be challenging for organizations to build credibility in the midst of a controversy. Wherever possible, public health organizations should build constructive, long-term relationships with their communities, especially when there are no specific public health controversies. Public health organizations and their staff should be recognized as credible sources of public health information who can be counted on to provide helpful and understandable advice whenever risk controversies emerge.

**Be available:** In the internet age, where information can travel almost instantaneously and there is an abundance of competing information about environmental health risks, people can find answers to their questions very quickly. However, online information is of highly variable quality. Non-technical audiences may not be well equipped to judge the accuracy of information, or to interpret highly complex reports. Public health agencies must be available and accessible or people may rely on less relevant, biased, incomplete, or confusing information as they seek to understand risk issues.

## RISK COMMUNICATION FRAMEWORK

Risk communication involves four main objectives:

- understand the audience(s)
- analyze information
- organize information
- engage audiences

The goal of the engagement is different in precaution advocacy and outrage management settings. In precaution advocacy, engagement is intended to drive action. In outrage management, engagement is intended to increase understanding, promote reasoned dialogue and reduce fear and outrage. The main activities of each step in this framework are identified in Table 1.

Note that this framework is iterative in nature. A key aspect (noted under Engage the Public) is to obtain feedback and use it to refine the understanding of the audience, update information, and determine the most effective ways of sharing information for specific audiences.

**Table 1: Risk Communication Framework** (adapted from Brecher and Diggins, 2012)<sup>6</sup>

Objective	Activities
Identify and Understand the Audience(s)	<ul style="list-style-type: none"> <li>• Sub-populations/demographic groups/geographic area, etc.</li> <li>• Current knowledge of the issue</li> <li>• Main sources of information</li> <li>• Perceptions, priorities and values</li> <li>• Credibility influencers</li> <li>• Barriers to effective communication</li> </ul>
Analyze Information	<ul style="list-style-type: none"> <li>• Audiences' underlying concerns</li> <li>• History of the issue</li> <li>• Information sources – access and</li> </ul>

Objective	Activities
	credibility <ul style="list-style-type: none"> <li>• Misperceptions, urban myths</li> <li>• Confusing information</li> <li>• Opposing views</li> </ul>
Organize Information	<ul style="list-style-type: none"> <li>• Spokesperson protocol</li> <li>• Holding statements</li> <li>• Key message development</li> <li>• Information repository</li> <li>• Spokesperson training and preparation</li> </ul>
Engage the Public	<ul style="list-style-type: none"> <li>• Communication vehicles (news media, internet, public or individual meetings or phone calls, letters to affected people, radio interviews, etc.)</li> <li>• Verbal and non-verbal communication</li> <li>• Account for different learning styles</li> <li>• Obtain and respond to feedback</li> <li>• Respond to concerns</li> <li>• Track interactions, issues and resolutions</li> </ul>
<b>Then evaluate and, if necessary, revise communication strategy</b>	

## PREPARING TO COMMUNICATE

Risk communication requires planning, preparation and practice to be effective.

**Planning:** Risk communication is a process, not an event. Whether the project timeline is long or short, risk communication benefits from good planning. Planning work should tie communication opportunities to project milestones, and should have clear, project-related objectives that tie to the main risk communication goals outlined above (build stakeholder understanding, increase credibility over time, promote an appropriate level of concern and appropriate actions) and the specific information needs of stakeholders. Risk communication planning should consider the current capacity, views, perceptions and priorities of stakeholders, as well as their “information habits”: sources they find credible and sources that are most commonly accessed for information on the issue. As the plan is implemented, its success in achieving stated goals should be evaluated and the plan modified as appropriate.

**Preparation:** Effective communication requires that the speaker be prepared and have a good understanding of:

- the issue to be discussed
- audiences’ current understanding of and engagement with the issue, along with their views on the issue, and any barriers to effective communication

- sources of confusion or misunderstanding, including jargon, acronyms, competing views, poor previous communication on the same or related issue, or perceived connections to other issues.

Communication training is recommended for spokespeople who will be communicating with the public or other non-technical audiences in a risk controversy.

**Practice:** Speakers should practice to maximize their credibility as a spokesperson and be as helpful as possible to people trying to evaluate information which may be complex, confusing or frightening. Practice should focus on speaking clearly, simply and concisely, with interest and commitment and without hesitation. Speakers can record themselves and then evaluate and improve both non-verbal and verbal communication.

When practicing to improve risk communication skills, consider the following characteristics of effective communicators (adapted from Brecher and Diggins, 2012)<sup>6</sup>:

- Very knowledgeable on the subject
- Well prepared (understand concerns, prepared with key messages and supporting facts)
- Defines goals for communication opportunities
- Forthcoming, honest, at ease
- On time, cooperative and helpful
- Empathetic, non-judgemental and able to validate concerns (without necessarily agreeing)
- Focused forward (avoid digression and regression)
- Stays within area of expertise
- Understands that everything is 'on the record'
- Manages non-verbal cues that could undermine credibility
- Knows when to stop talking (and listen)

## WHERE CAN I GET MORE INFORMATION?

*For more detailed information on risk communication, please refer to:*

Covello VT, Peters RG, Wojtecki JG, Hyde RC. Risk communication, the West Nile virus epidemic, and bioterrorism: responding to the communication challenges posed by the intentional or unintentional release of a pathogen in an urban setting. *J Urban Health*. 2001;78(2): 382-91. Available from: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3456369/>

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## Authors

Ronald W. Brecher, PhD, Senior Scientist, Public Health Toxicology and Risk Communication

Ray Copes, MD, Chief, Environmental and Occupational Health

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