

Dr. Peter Sandman addresses Minnesota's Annual Community Health Conference

On Sept. 12, 2002, Dr. Peter Sandman – an internationally recognized expert on crisis and risk communication – addressed state and local public health officials from across Minnesota at their annual Community Health Conference. The following summary of Dr. Sandman's presentation was prepared by Buddy Ferguson, Risk Communication Specialist, Minnesota Department of Health.

Additional information about Dr. Sandman's work is available on his website at www.psandman.com. Two articles posted on the site are of particular relevance: "Anthrax, Bioterrorism, and Risk Communication: Guidelines for Action" (www.psandman.com/col/part1.htm) and "Risk Communication and the War Against Terrorism: High Hazard, High Outrage" (www.psandman.com/col/9-11.htm). Questions or comments can be addressed to Dr. Sandman at peter@psandman.com.

Many of the themes from Dr. Sandman's CHC presentation will be explored in greater depth in a CD-ROM program on "Emergency Risk Communication," now being developed by the U.S. Centers for Disease Control and Prevention as part of its CDCsynergy series. Dr. Sandman will be contributing three articles to the CD: "Dilemmas in Emergency Communication Policy," "Beyond Panic Prevention: Addressing Emotion in Emergency Communication," and "Obvious or Suspected, Here or Elsewhere, Now or Then: Paradigms of Emergency Events." These articles will eventually be posted on Dr. Sandman's website.

Why is it important to plan for bioterrorism – even if the risk of an attack is low?

- The psychological impact will be significant even if the attack doesn't take place in your immediate area. It is the purpose of terrorism to have a psychological impact on a large number of people by attacking a small number of people.
- Even if we never see a major bioterrorism attack here, we may have to deal with copycats and "wannabes."

The Basics of Risk Communication

The way in which people perceive risk has two components – ***hazard***, which refers to the actual quantifiable risk of negative consequences, and ***outrage***, which refers to a number of non-quantifiable factors that can serve to increase the public's level of concern. Sandman observes that the mathematical correlation between hazard and outrage is *nearly zero*. In other words, the level of "outrage" over a particular risk is almost completely unrelated to the level of statistical risk involved.

The **task of risk communication** is to “manage the outrage” – i.e., to increase or decrease the level of concern, so it better reflects the level of quantifiable risk.

In his presentation, Sandman cited 12 factors that serve to increase “outrage” – and according to Sandman, virtually all of them would be operative in a bioterrorism incident. A threat (or event) is viewed as riskier if:

1. Exposure to the threat is **coerced** (rather than voluntarily assumed). Exposure to bioterrorism is clearly not voluntary.
2. The source of the threat is **industrial** (“manufactured” or “man-made” rather than “natural.”) Bioterrorism is clearly not the result of natural forces.
3. The threat is **exotic** (rather than “familiar). Bioterrorism is not part of familiar experience for most people.
4. The threat (or event) is **memorable** (rather than easily forgotten). Bioterrorism would tend to leave an indelible impression.
5. The threat involves something **dreaded** by the public – as a bioterrorism attack clearly would be.
6. The event is **catastrophic** in its impact (with large numbers of casualties, in one place, at one time – rather than “chronic,” with fewer casualties, dispersed in time and space). A bioterrorism event would typically be choreographed to have a large impact in a particular place, at a particular time.
7. Whether the threat exists (and the magnitude of the threat) are **unknowable** (rather than easily perceived or identified). It’s unlikely that we would have any advance knowledge of a bioterrorism attack – and disease pathogens usually cannot be detected by the senses before they make us ill.
8. The threat (or event) is **controlled by others** (rather than being under the control of the individual). The terrorist is clearly in the driver’s seat in terms of controlling a bioterrorism event.
9. The impact of the event is imposed on people in an **unfair** manner. There is clearly nothing fair and equitable about the impact of a bioterrorism event.
10. The threat (or event) is **morally relevant**. Most people would regard an act of bioterrorism as clearly immoral.
11. Available **sources** of information about the event are seen as **untrustworthy**. Good information, from trustworthy sources, will clearly be at a premium during a bioterrorism incident.
12. The **process** by which the threat was imposed was **unresponsive**. People would clearly have no input into the process by which they are exposed to a bioterrorism attack.

Risk communication **differs from “public relations.”** PR assumes that the public is *apathetic but credulous* – i.e., it’s hard to get their attention (or hold it for very long), but they will readily believe what you tell them. Most of the time, people like politicians and

health educators operate in the same sort of environment, where people are inattentive but easily persuaded (if you can get their attention).

Risk communication is **more like “stakeholder relations”** – where the audience is highly attentive but skeptical of what you say.

An important principle of risk communication is the **“see-saw” effect**. In situations where people are ambivalent about issues like risk, they will tend to take the opposite position from the one you are articulating. In metaphorical terms, they will tend to take the **opposite** seat on the “cognitive see-saw” from the one where *you* appear to be sitting:

- If you attempt to reassure, they will react by becoming alarmed. If you appear to be alarmed, they will be reassured (because you are taking on the burden of being alarmed).
- If you are discussing a “worst case scenario” (a situation where the probability of something happening is low, but the consequences if it does happen are very serious), they will focus on the side of the equation that you seem to be ignoring. If you dwell on the low risk, they will dwell on the severity of the possible outcome. If you dwell on the severity of the possible outcome, they will dwell on how low the risk is.
- If you assume the blame for a bad situation, they will tend to forgive you. If you attempt to absolve yourself, they will tend to blame you.

During a bioterrorism attack (or some other crisis event), “stakeholders” (i.e., attentive but skeptical people) will tend to become the dominant group in the population. (Usually they’re in the minority.)

The outrage/apathy continuum. Usually, **emotional responses to a perceived threat** fall along a relatively short continuum, ranging from apathy to fear, with “concern” as the dominant response. However, under certain conditions, *outrage can extend the continuum* into *terror*, and ultimately, *denial* or *panic*. Although much crisis communication tends to focus on **panic** as the extreme response to a threat, **denial** is actually more common – and a bigger concern for the risk communicator. Excessive efforts to address panic may distract us from the more important task of addressing denial.

Denial is not apathy. Denial is a “circuit breaker” – a way of dealing, psychologically, with unbearably extreme fear. While denial makes people *act as though* they’re apathetic, apathy and denial are very different, and they require different strategies. Apathetic people are capable of responding to warnings. People in denial do not. They do not need more information. They **need help dealing with their fear**. In managing outrage, we want to move people to the concern/fear segment of the continuum.

An important strategy for helping people deal with fear is *giving them something they can do to protect themselves*.

Other dimensions of emotional response include:

- **The Empathy (Sadness) Continuum.** The end point of this continuum is clinical depression. This was an important component of the way in which we reacted to the 9-11 attacks. The focus here is the *impact of the event on other people*. We can help people deal with their sadness by *giving them something they can do to help others*.
- **The Anger Continuum.** In response to a crisis, some people may experience anger. Anger can progress into rage, and ultimately “flip” into paranoia (just as extreme fear can “flip” into denial). This dimension – not “panic” – is the source of phenomena like rioting. Fear can sometimes “flip” into anger (more commonly in men), and anger can “flip” into fear (more commonly in women). Again, lack of options for constructive action can cause people to “flip” from fear to anger – or anger to fear.
- **The “Hurt” Continuum.** This is the dimension that led people to ask “why do they hate us?” in the wake of 9-11. Not only do people fail to understand why others might not like us – they didn’t really want to know. The issue here is injured self-esteem – and possibly suppressed guilt. Like anger, hurt can also “flip” into fear.

Emergency Paradigms. We can develop effective strategies for dealing with crises/emergencies if we classify them according to three basic variables:

1. Do we know if it’s actually an emergency?
2. Is the location of the emergency here – or somewhere else?
3. Is it something that would be occurring in the past, present or future?

The top priority for risk communication is something that would definitely be an emergency, occurring where you are, but in the future (the “**certain/here/future**” paradigm.)

To communicate effectively about “certain/here/future” events, you should:

1. Describe what could happen (the kind of event you’re planning for).
2. Explain what contingencies you are planning for – and which ones you are not (e.g., we’re not planning for x because its impact would be relatively minor, we’re not planning for y because it has already been addressed, etc.)
3. Describe your planning priorities – which contingencies you believe are most likely to occur, and which are likely to have the most serious consequences. This can provide an opportunity to redirect people’s concerns, by reassuring them about some issues, and alerting them to others.

4. Describe what you've already done to prepare for the emergency.
5. Describe the precautions that you are planning or anticipate taking – and which precautions you are *ruling out*.
6. Describe the balance, in your planning, between *preventing* an event and *responding* to an event after it happens. (Americans tend to stress the prevention aspect of planning for an event, while shortchanging the response aspect.).
7. Describe the precautions members of the public should take in anticipation of an event – and those actions that you want to discourage them from taking. Provide a continuum of options – things they should do, things they may want to do, etc.
8. Tell the public what they can do to help implement your plan.

In talking about the certain/here/future paradigm, and discussing likely scenarios versus worst-case scenarios, don't avoid talking about worst cases. Grab the "serious consequences" seat on the risk communication see-saw – and let the public have the "not likely to happen" seat.

Other event paradigms of special interest:

- The "**certain/here/past**" paradigm. When a crisis is in progress, the media and the public will tend to be supportive of efforts to address the situation. However, when the event is over – "in the past" – a "period of recriminations" may set in. People may begin looking for someone to blame for whatever went wrong during the crisis. In that situation, be prepared to be self-critical. Assume the "blame" seat on the risk communication see-saw – and let the public take the "absolution" seat.
- The "**certain/elsewhere/now**" paradigm. The issue here is distance – how far away from you is the crisis event occurring? The elsewhere category can be divided into three "zones." Although geography may help to define which zone an event falls into, perceived vulnerability is also part of the picture.
 - 1) The "**not our problem**" zone. The issues here revolve around the "empathy" family of emotions. When the crisis event occurs in this zone, it may provide a good opportunity to "sell" people on the need for preparedness.
 - 2) The "**we could be next**" zone. This variation of the paradigm requires a discussion of what precautions people can take to protect themselves. It's important to acknowledge and legitimize the fears that people may have, in order to prevent them from "flipping" into denial. Also be sure to include a discussion of "how we'll know" if the crisis begins to affect your area – i.e., when it moves into the "here" category.
 - 3) The "**right next door**" zone. This scenario poses the greatest risk of throwing people into denial. (The risk of denial is actually less in a "certain/here/now" situation, where there the crisis is clearly present and people are in the midst of coping with it – the "eye of the storm" effect.)

To combat the possibility of denial, it's even more important to emphasize what people can do to protect themselves, and to acknowledge/legitimize their fear.

People will be especially vigilant when the threat is “right next door,” and that vigilance can be harnessed as part of your response plan. People may experience survival guilt (it happened to people “right next door,” but not to them), but they may also be resentful of the attention the “people next door” are getting: People living on the edge of a crisis may want to be in it themselves. To deal with that, you may want to provide people with a range of *voluntary options* for protecting themselves, based on what *they* think is prudent.

Don't simply tell people to *completely refrain* taking a particular protective action until such time as “the authorities” tell them they *have* to do it. Examples, according to Sandman, would include smallpox vaccinations, and keeping a personal supply of Cipro for use during an anthrax attack.

- The “**uncertain/here/now**” paradigm. This is the situation where you know something is happening, and that it's happening “now,” but you don't know if it's really a crisis. Taking action when you don't know if you have a problem can be costly – financially and in other ways. However, inaction can also be extremely costly if it turns out that you're dealing with a real crisis.

The preferred course of action, in risk communication terms, is to “go public” about whatever decision you made – laying out the choices you were forced to make, what you did or did not choose to do, and your reasons for making those choices. Always let people know when you are dealing with a wait-and-watch situation, which may or may not turn out to be an actual crisis.

This approach is an example of “dilemma sharing” – which includes sharing your uncertainty about a situation. Sharing your uncertainty allows people to take the “confident” seat on the risk communication see-saw – because you're dealing with the “uncertainty” side of the equation.

(**AN ASIDE:** Avoid using the “security excuse” for failing to share information with the public. Most often, the need for security isn't the real reason that people withhold information. Also: Don't be afraid to make an educated guess about how people will react to information. If we bother to make a guess – and, more often than not, we don't – it's likely that our guess will be correct.)

Risk Communication Dilemmas

The following 10 “dilemmas” involve choices that you will need to take, in your communications, between competing values or approaches. Sandman emphasizes that his positions on these “dilemmas” are tentative, that other risk communicators may not agree with his positions, and that – for most of us – his advice will tend to be counter-intuitive. He acknowledges that he tends to take the “extreme position” on these issues, unlike

some other risk communicators, who more often tend to take a “middle of the road” position.

1. **Candor (versus “telling the truth carefully”)**. Sandman argues that it’s almost impossible to be too candid. Candor is often undermined by “careful wording,” which may give the appearance of candor while actually concealing what’s going on. He notes that people give a variety of reasons for avoiding candor – and many of them have some validity. However, he argues that people are at their best when they feel they’ve been “leveled with” – and that lack of candor can give rise to reprisals and panic.

He recommends that you include concrete examples of “insufficient candor” in your communications plan – and that you start with an extreme definition of appropriate candor, since your natural tendency will be to err on the side of being less-than-candid. He further recommends that you specifically document and log any decision that you consciously make to withhold information – what you deleted, and your rationale for holding it back.

He acknowledges that there are some situations where information is so inflammatory, or the act of releasing it would be so damaging, that it *must* be withheld – and you can *never even reveal, after the fact, that you have withheld it*. However, at most, you should only face a situation like this once in a career – and you should be willing to stake your career on the choice you made.

2. **Speculation (versus declining to speculate)**. Sandman warns against declining to answer questions – or provide information – on the grounds that what you have to say is “speculative.” He notes that all statements about the future are in some sense “speculative.” What you *should* avoid is speculating with *excessive certainty*. Talk about what you know and what you don’t know, what you’ve ruled in or ruled out – and what issues or questions you haven’t even addressed yet. Describe – candidly – any debate or discussion that may have taken place within your organization. *Acknowledge* dissent, if there was any. Share your understanding of the situation as fully as possible, and discuss “worst case” as well as “most likely” scenarios.
3. **“Daring to be Tentative” (versus “excessive confidence”)**. Sandman counsels against projecting an excessive sense of confidence, or even using the word (“We are confident that.....”). Confidence is a “see-saw” value – if you take the “confident” seat, the public will be forced to take the “uncertainty” seat. Sandman *does* recommend that, *after we acknowledge uncertainty*, we project a sense of confidence about our ability to *deal* with it – in the manner of Rudolph Giuliani in the aftermath of the 9-11 attacks. Being tentative is an example of “dilemma sharing,” in which we acknowledge that we’ve had to make a tough call – *either* before or after we made the decision.
4. **Alarm (versus “reassurance”)** Sandman warns against attempting to “over-reassure” people in an emergency – even though that’s what most people, including the media, tend to do. He argues that, in a crisis situation, it is impossible to “over-alarm” people. The greater danger is to make people apathetic

– or cause them to flip into denial – and both the tone and the content of your communications must take that into account.

In an emergency, your first message should always be *the scariest* one you'll ever have to give. *Don't* be in the position of saying, later on, that the situation is “worse than you thought.” It's much better to stake out an “alarmist” position, and then be able to gradually back off from it over time.

You *should* try to provide reassuring information even as you project alarm – but put it “in the subordinate clause” of your message. (E.g., “We are still very concerned about this situation, although we do now have some information suggesting that things aren't so bad.”)

5. **“Being Human” (versus “being a professional”).** Sandman recommends that you “let your humanity show” when communicating in a crisis, as opposed to presenting yourself as a “detached professional.” Don't be afraid to show emotion – fear, anger, sadness, empathy, compassion. Do not use words like “sympathy” or “regret” – they have been devalued, because they have so often been used without sincerity in the past. Do use personal pronouns (“I” or “we”), and tell stories to illustrate what you're saying.
6. **Being apologetic (as opposed to “defensive”).** Be prepared to apologize – to “wallow in mea culpa.” According to Sandman, the public should have received an apology – but hasn't yet – for erroneous advice provided to them during last year's anthrax attacks (i.e., that anthrax spores couldn't escape from a sealed envelope).

Be prepared to apologize whenever things turn out badly – not just when you've actually made a mistake. Tell people that you “wish things had turned out better.” Express concern and sympathy for any and all parties that suffered loss or injury. Be prepared to assume personal responsibility for what happened.

Also note that a discussion of “lessons learned” is not the same as – or a substitute for – an apology. Apologize first – feedback from the public will tell you when to move on to “lessons learned.”

7. **Decentralizing (rather than centralizing) your communications.** The key questions here are: Do you allow/encourage making information available from independent sources (rather than one centralized source)? And do you allow divergent (or dissenting) voices to be heard? In both cases, according to Sandman, the answer should be “yes.”

Do not try to muzzle people – that can isolate them, giving them a unique perspective, and thereby making them a “prize source” for the media. Instead, make sure that everyone who's likely to talk has all of the information. Especially make sure that your *critics* are “in the loop.”

According to Sandman, the notion that dissent must be suppressed during an emergency is *false*. Don't try to pretend that your decisions are easy. You want people to know that dissenting opinions were offered – and considered. It will actually work against you if you succeed in concealing dissent. If that happens, people will think that opposing views were not solicited or taken into account –

that there was no deliberation or debate involved in your decision-making process.

8. **Letting people do things – and make decisions -- for themselves (as opposed to doing things – and making decisions – for them).** As your default strategy, give people actions they can take to protect themselves – things they can *do* – in an emergency situation. Let them make decisions about how to do that, rather than deciding for them and telling them what to do.

If possible, give them a *continuum* of advice and recommendations – things that they *must* do, things that are *desirable but optional*, and things that are *completely optional*, but available if they feel they need an extra measure of protection. Ask people to think about the issues involved, and make decisions about matters like whether they want to stockpile Cipro (to prepare for an anthrax attack) or get a smallpox vaccination.

The issue, according to Sandman, is the message we give people. If we take away their options, we are telling them “we don’t trust you.”

9. **Planning your communications to deal with denial and depression (rather than panic).** Again, according to Sandman, fear is more likely to progress into denial, rather than panic – although most emergency planners tend to spend more of their time worrying about panic.
10. **Erring on the side of caution (rather than trying to limit yourself to measures that are clearly necessary).** Get the public used to the idea of taking precautions that may prove to be unnecessary. The need for excessive caution will tend to be self-limiting, since the terrorist will look for areas where we’re under-prepared, and avoid areas where we have taken a cautious approach to protecting ourselves.