



The Risk Communiqué

Summer 2008

Welcome to this edition of *The Risk Communiqué*, a quarterly newsletter devoted to sharing insights about risk communication policies, philosophies, and practices. If you received this issue, you probably bought a copy of *Risk Communication: A Handbook for Communicating Environmental, Safety, and Health Risks* or met the primary author at a conference, training session, or consultation. This newsletter is being provided to help you communicate complex scientific and technical information.

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News Coverage of Risks May Emphasize Treatment Over Prevention

The news media has the difficult job of reporting information in a way that engages, and even entertains, its audience. That trait may explain why most news stories about health risks focus on treatment rather than prevention.

Researchers at Michigan State University studied news coverage of breast cancer in the *New York Times*, *Los Angeles Times*, *USA Today*, *Time*, *Newsweek*, *U.S. News and World Report*, *NBC Nightly News*, *ABC World News Tonight*, and the *CBS Evening News*.

Analysis of national coverage of the disease in 2003 and 2004 found that nearly a third of the stories discussed treatment but less than a fifth looked at prevention. The work was funded by the National Cancer Institute and the National Institute of Environmental Health Sciences, and the results were recently published in the *Journal of Health Communication*.

The researchers had several concerns about the results. One was the potential for complacency. "What we're concerned about is people will think, 'well, the scientists are going to come up

with a cure, so we don't need to worry about prevention,'" Charles Atkin, one of the authors of the study and a University Distinguished Professor of communication at Michigan State, said in the university's press release.

Researchers also worried that the coverage overlooked two key pieces of risk information: prevention and environmental risk factors. The news stories focused on personal narratives of cancer patients rather than data and statistics by a two-to-one margin. This focus may be caused by the bias of the news media toward "people" stories, which are seen as inherently more interesting.

In addition, though environmental risks factors can be a strong contributor to breast cancer risks, only 12% of the stories mentioned a prime risk factor — hormone replacement therapy. Advice to parents on how they could raise their daughters to prevent breast cancer, through diet and exercise, was completely lacking.

The implications for risk communicators are twofold: Make prevention information more

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News Coverage of Risk May Emphasize Treatment Over Prevention

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narrative and focused on people when dealing with the news media, and consider multiple methods of communicating risk to ensure that important information is included.

See the university's press release for more information at <http://www.newsroom.msu.edu/site/indexer/3374/content.htm>.

Patients Prefer Pictures But Still May Not Act

Researchers at the University of Auckland, New Zealand, recently surveyed 100 patients with heart disease to determine the most effective method of communicating risk and treatment options. In the study, reported in the May/June 2008 issue of *Annals of Family Medicine*, more than half the patients chose a graphical representation of people colored green or red to represent risk, preferring to see the risk information communicated in pictures. Less than 20% preferred to see the information presented as relative risk. And about two-thirds preferred to be given their physician's opinion rather than be presented with either numerical or graphical depictions of risk.

Participants were from low-, middle-, and high-income areas and ranged in age from 39 to 87. Approximately 40% were women. About one third were college educated; nearly half showed a basic understanding of numbers.

They were sent a questionnaire by mail, followed by a phone interview. Researchers told them about a hypothetical medication with few adverse effects that would reduce

the risk of a future heart attack from 23% to 16% in 5 years. This risk information was presented in eight ways, seven of them numerical formats (many of which were recommended in the risk communication literature) and one graphical format.

In general, patients had a difficult time understanding risk, and they didn't understand percentages. In fact, even those who preferred the pictorial representation sometimes weren't willing to accept the medically approved action and take the medication.

In an editorial to the article, David J. Spiegelhalter, Ph.D., of the Center for Mathematical Sciences in Cambridge, England, suggested that health care professionals use multiple representations to communicate the same information. That is, use both text and graphics to communicate risk. In addition, pretest graphics whenever possible to ensure they meet the needs of your audience.

See the full story at <http://www.medpagetoday.com/Cardiology/Dyslipidemia/tb/9395>.

Study Highlights Potential Problems in Pandemic Planning

A report in the *Journal of Homeland Security and Emergency Management* reveals a long list of problems that could hamper planning for pandemic influenza. Researchers at Purdue University interviewed public health, emergency preparedness, and

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Potential Problems in Pandemic Preparedness

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If you need more assistance in risk communication, public involvement, or science and health communication, or need to train staff in these areas, please contact Regina Lundgren at lundgren@owt.com or 509-582-6995. For more information about risk communication, see <http://www.rlriskcom.com>.

hospital officials in 11 Indiana counties on their impressions of pandemic planning. The results revealed problems ranging from misunderstandings of the threat to lack of coordination and resources.

Several problems have implications for risk communication. One was that some officials felt that planning was useless. Their definition of the risk far exceeded the worst-case scenarios, making them believe that so many people would be ill or dying that nothing could be done to prepare. The report authors encouraged international, federal, state, and academic public health experts to more effectively communicate the risks of a pandemic.

Another problem was the expectation that the state would step in to help communities, either by activating the National Guard or by issuing a proclamation from the governor. This expectation had never been validated through a consensus-building process or through sound risk communication practices.

One piece of good news was that health officials recognized the key role information will play in preparing for and responding to a pandemic. They stressed the importance of convincing those with the disease to care for themselves when possible and educating the public to prevent exposure by encouraging social distancing. In addition, nearly all counties had a basic communication plan to inform the public about the risks, the local response, and how to get care. However, officials frequently didn't consider options for how this information

would be disseminated. For example, some relied on the closest media outlet, regardless of whether it would actually reach their intended audience in an emergency. Emergency communication plans must be tested to ensure activities will function as planned in a crisis.

For more information on the study, see <http://www.cidrap.umn.edu/cidrap/content/influenza/panflu/news/ju10908counties.html>.

Working with the News Media: Ask for a Fact Check

The news media is one of the quickest ways to reach a wide cross-section of people at risk. Yet many risk managers fear working with reporters. Horror stories abound of scientific information that was skewed or even completely wrong when it hit the air or print. When risk managers allow interviews, some request the right to review the story first. Given deadlines and the expectation of journalistic integrity, that's nearly always impossible.

Public relations guru Joan Stewart, aka The Publicity Hound, has another suggestion: ask for a fact check.

"You can never be 100% certain that the reporter will report the facts accurately," wrote Stewart in her weekly tips newsletter. "But you can increase your odds by asking for a fact check. That means that after the story is written, the reporter calls you and

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recites the facts of the story. If, for example, the story states that your company has 247 employees, you can keep the reporter from making an error by pointing out that the correct figure is 274.”

If a reporter doesn't know what you mean by a fact check, she recommends explaining it this way: “A fact check is a way for both of us to make sure the facts are accurate. It also keeps you from having to run a correction if something is wrong.”

Stewart says that will get their attention. Reporters hate having to write corrections because it calls attention to the fact that they made a mistake. If you can help them avoid that, you both come off ahead.

For more advice from Joan Stewart, see her web site at <http://www.publicityhound.com>, where you can subscribe to her newsletter and receive free by e-mail the handy list “89 Reasons to Send a News Release.”

Websites of Interest

Real Age Disease Risk Quiz

http://www.realage.com/health_guides/checkup_checklist/fs_cc.asp

Real Age is the online platform of Drs. Michael Roizen and Mehmet Oz, who brought us the bestselling book *You: The Owners Manual*. All hype aside, this test is an interesting way for patients to begin the dialogue with their physicians.

Diversity Preparedness

<http://www.diversitypreparedness.org/>

The National Resource Center on Advancing Emergency Preparedness for Culturally Diverse Communities is a joint initiative of the Drexel University School of Public Health's Center for Health Equality and the U.S. Department of Health and Human Services' Office of Minority Health. Its website provides a central

clearinghouse of resources to facilitate communication, networking, and collaboration among key players working to build resilience and eliminate disparities for culturally diverse communities in emergencies. The site features hundreds of cross-referenced annotated resources in over 40 languages highlighting research, training, and education opportunities; measurement and evaluation tools; effective risk communication strategies; and other successful programs and projects.

Promising Practices: Pandemic Preparedness Tools

<http://www.pandemicpractices.org>

This web database provides examples and tools for pandemic planning by state across multiple categories, including risk communication, community engagement, and resiliency.