

Session 1.5

Using Risk Communications approach for Dialogue with Stakeholders in Complex Radiological Circumstances

Dr Gaya M Gamhewage
World Health Organization, Geneva

Communicating risk is at the heart of both public health and clinical medicine. While much has been learnt in the past four decades, few health professionals use a systematic approach to determine the best strategy for risk communications. The proper understanding of risk communications can be useful for an effective dialogue with stakeholders in complex situations as those posed, or perceived to be posed, by radio nuclear threats.

While experts focus on the science and evidence for risk assessment and risk communications, the public tends to react on a more sub-conscious level and may be driven by fear, emotions and outrage. Radio-nuclear hazards have all the characteristics that elicit extreme concern by the public¹, regardless of if there is a real threat or not. Therefore it is essential to understand how people perceive the issue and the threat to their well-being and how others may influence them, including the media, family and civil society.

Trust is the currency for effective risk communications and dialogue between stakeholders. Many things can diminish the trust the public has in experts – withholding information, delaying communications and engagement, using jargon, not being transparent, over-reassuring , not being empathetic and focusing on only the facts. Risk communications is a balancing act on a knife's edge. It therefore requires, knowledge, skills, practice and courage.

It is essential to understand that we live in a fast-changing world. Confidence in doctors and health workers are declining globally. In Japan only 17%² of patients would recommend their doctors to other patients, and gave their doctors a one of the lowest scores worldwide (10%) for their communications skills³. The way the public seeks health information has changed too with a massive shift towards the internet (79% of Japanese use internet) and the use of electronic devices such as mobile phones for health advice (83% of Japanese).

The influence of media, social networks, public opinion should not be underestimated. Therefore it is important to find multiple ways to engage these groups in education, information sharing, problem and concern identification and in dialogue based on trust-based relationships and finding solutions. In order to do this, we must listen to public concerns , identify and deal with rumours early on and be the first to speak on and frame when issue, even when the information is incomplete. This last requirement is the hardest for scientists and experts.

¹ Peter Sandman, Outrage Assessment Factors, <http://www.psandman.com/outrage.htm>

² WIN/Gallup International Survey on health care, 2012

³ WIN/Gallop International Communications Assessment (CAT) tool, 2011

Depending on the extent of the real hazard, ie the evidence that a group or a (vulnerable) person has been exposed to something harmful); and on the analysis of the concerns and outrage about the issue, it is possible to choose one of four risk communications strategies⁴ - precautionary advocacy, crisis communications, outrage management and health education. Each one of these requires a different set of actions to execute effectively.⁵

⁴ Peter Sandman, <http://www.psandman.com>

⁵ WHO Communications Training, participant handbook, 2012