Quick Guide

2008
A NOTE ABOUT CRISIS AND EMERGENCY RISK COMMUNICATION (CERC)

CERC is an introductory course that addresses a number of topics critical to successful public, partner, and stakeholder communication during an emergency situation. CERC is not an in-depth course on risk communication, issues management, or crisis/disaster communication. Rather, it is an amalgamation of all of these elements that have been incorporated into practical applications.

There are currently three modules in the CERC series: Basic, Leaders, and Pandemic Flu.

For more information about CERC send your email message to CERCINFO@cdc.gov
INTRODUCTION

What do emergencies, disasters, and crises have in common? Simply, that something bad has happened or is happening. When something bad and/or unexpected happens, it may be called an emergency, a disaster, or a crisis depending on the magnitude of the event and the current phase of the event.

Crisis and emergency risk communication is the strategy used to provide information that allows an individual, stakeholders, or an entire community to make the best possible decisions during a crisis emergency event.

Disasters are the ultimate test of emergency response capability. However, terrorism or bioterrorism events may be even more challenging because the focus will be on criminal investigations, a new concept for public information officers in the public health community to consider when responding to a public health crisis.

Understanding the communication roles and responsibilities of the federal government and its counterparts at the state and local levels during the planning for, and reaction to, emergency risk situations is a challenging task. And while many organizations and agencies provide recommendations, sample plans, and training and assistance, there is no prescribed best way for departments of health to assign roles and responsibilities when generating their communication plans.

However, there are recommendations and tools that can help to facilitate those decisions. This booklet is designed to help you get started.
MODULE ONE

Introduction to Crisis & Emergency Risk Communication

✓ What is Crisis and Emergency Risk Communication (CERC)?

✓ The Risk of Disaster

✓ Crisis Communication Lifecycle

✓ The Role of CERC
INTRODUCTION TO CRISIS AND EMERGENCY RISK COMMUNICATION

What is Crisis and Emergency Risk Communication?

Crisis and emergency risk communication (CERC) encompasses the urgency of disaster communication with the need to communicate risks and benefits to stakeholders and the public. For the purpose of this guide, the definitions of crisis and risk communications were combined to create a working definition of CERC.

Crisis Communication is most often used to describe an organization facing a crisis and the need to communicate about that crisis to stakeholders and the public.

Risk Communication was often used in the area of environmental health. Through risk communication, the communicator hopes to provide the receiver with information about the expected type (good or bad) and magnitude (weak or strong) of an outcome from a behavior or exposure.
CERC encompasses the urgency of crisis communication with the need to communicate risks and benefits to stakeholders and the public (risk). This is the communication that goes on in emergency rooms, not doctors’ offices.

Furthermore, a decision must be made within a narrow time constraint, the decision may be irreversible, the outcome of the decision may be uncertain, and the decision may need to be made with imperfect or incomplete information.

The Risk of Disaster

Disasters are the ultimate test of emergency response capability. The ability to deal effectively with disasters is becoming more relevant as the factors that tend to increase risk are also increasing. Some of these factors include the following.

- Increasing population density
- Increased settlement in high-risk areas
- Increased technological risks
- Aging U.S. population
- Emerging infectious diseases and antimicrobial resistance
- Increased international ravel
- Increased terrorism

Crisis Communication Lifecycle

Understanding the pattern of a crisis can help communicators anticipate problems and respond effectively. For communicators, it’s vital to know that every emergency, disaster, or crisis evolves in phases and that the communication must evolve in tandem. By dividing the crisis into phases, the communicator can anticipate the information needs of the media, stakeholders, and the general public.
**Precrisis:** During this phase, all the planning and most of the work will be conducted. Communication objectives during the precrisis phase are: 1) Be prepared, 2) Foster alliances, 3) Develop consensus recommendations, and 4) Test messages.

**Initial:** During this phase of a crisis or emergency, your audiences (i.e., public, media, stakeholders, etc.) want information now. Communication objectives during the initial phase are: 1) Acknowledge the event with empathy, 2) In the simplest terms, explain the risk, 3) Establish credibility for your organization and/or spokesperson, 4) Provide emergency information, and 5) Make a commitment to your audiences to provide accurate/time updates.

**Maintenance:** During this phase, processes for tracking communication activities become increasingly important. An ongoing assessment of the event and allocation of resources are essential. Communication objectives during the maintenance phase are: 1) Help people more accurately understand their own risks, 2) Provide background information on the crisis to those who need it (usually the media), 3) Gain support for response/recovery plans by providing accurate and timely information, 4) Thoroughly explain emergency recommendations, and 5) Empower individuals to make their own decisions about risks/benefits.

**Resolution:** As the crisis resolves, public/media interest begins to wane. A community is usually most responsive to risk avoidance and mitigation education directly after a disaster has occurred. Communication objectives during the resolution phase are: 1) Educate public to improve appropriate public response in future, similar emergencies, 2) Honestly examine problems and mishaps, reinforce best practices, 3) Gain public support for policies and resource allocation, and 4) Reinforce your organization’s identity both externally and internally.
**Evaluation:** When the crisis is over, evaluate your CERC response. Communication objectives during the evaluation phase are: 1) Evaluate your communication plan’s performance, 2) Document lessons learned, and 3) Determine specific actions to improve crisis systems or the crisis plan.

**The Role of CERC**

The purpose of a public health response to a crisis is to efficiently and effectively reduce and prevent illness, injury, and death and return individuals and communities to normal.

CERC can help counter some of the harmful human behaviors that arise during a crisis:

- Demands for unneeded treatment
- Disorganized group behavior (stealing/looting)
- Bribery and fraud
- Reliance on special relationships
- Increased alcohol and tobacco use
- Increased multiple unexplained physical symptoms (MUPS)
- Unreasonable trade and travel restrictions

CERC can overcome bad communication practices which increase the odds of a negative public response. Below are five factors that can lead to communication failures, followed by five factors for communication successes.
Five communication failures

• Mixed messages
• Information released late
• Paternalistic attitudes
• Not countering rumors and myths in real time
• Public power struggles

Mixed messages. The public does not want to have to “select” one of many messages to believe and act on. During the mid-1990s, States in the midwest experienced great floods during the spring. Response officials determined that the water treatment facilities in some communities were compromised and that a “boil-water” directive should be issued. A problem developed when multiple response organizations, government and non-government, issued directions for boiling water and each of them was different.

When faced with a new threat, people want a consistent and simple recommendation to follow. They want to hear absolute agreement about what they should do and they want to hear it from multiple experts through multiple sources. Messages do not have to be wrong to be damaging. If they are inconsistent the public will lose trust in the response officials and begin to question every recommendation. Local, state, regional, and national response officials and their partners must work together to ensure messages are consistent, especially when the information is new to the public.

Information released late. Following the September 11, 2001, U.S. terrorist attacks, many people wanted advice on whether or not to buy a gas mask and requested information from the Centers for Disease Control and Prevention (CDC). Three weeks after the attack, CDC had an answer on its website. During the
three weeks that CDC took to develop and vet its answer, a number of experts were willing to give an answer—unfortunately it was not the right one. When CDC issued advice to the public not to buy gas masks, the “gas-mask” aisles at local stores were already empty. If you cannot give people what they need when they need it, others will provide an answer for them. And those “others” may not have the best interests of the public in mind when they offer advice.

**Paternalistic attitudes.** People want and expect to be provided information that allows them to come to their own conclusions. As a response official, it is insufficient to satisfy one’s own worries with copious bits of information and then state a bottom line message that is unsupported by the currently known facts. As difficult as it may be, help the public to reach the same conclusion by sharing with them what you have learned to reach that conclusion.

Treat the public like intelligent adults and they will act like intelligent adults. Treated any other way, they will either turn on
officials or behave in ways that seem illogical. Officials are leaders, not parents, for the public. Never tell people “don’t worry.” Tell people what they need to know and allow them to reach the conclusion that they do not need to worry.

*Not countering rumors and myths in real-time.* During a pneumonic plague outbreak, for example, how successful will an organization’s drug distribution program be if a rumor starts that there are not enough drugs for everyone? What system is in place to monitor what is being said by the public and the media? A word of caution, do not spread a rumor by holding press conferences every time a rumor surfaces. A press conference may be necessary if a rumor has been widely published. If the rumor is circulating on the internet, post a response on the internet and have a telephone information service ready to deal with the rumor. The media will report rumors or hoaxes unless officials can rapidly explain why they are false. Have an open, quick channel available and ready to communicate with the media. Do not think “this is preposterous, and no one will believe it.” In a crisis, the improbable seems more possible. Deflect rumors quickly with facts.

*Public power struggles.* In an actual event, one state’s governor held a press conference about a public safety crisis at the same time the mayor of the city was holding one on the other side of town. This set the tone for speculation about who was in charge and what was or was not true.

In the information age, it is easy to see how this could happen. Sometimes there may be a power struggle over jurisdictions or other issues. These issues should be resolved quickly and confidentially. It is disconcerting to the public to think that the people responsible for helping them are not getting along. All partners need to have clearly defined roles and responsibilities. When they overlap, and they do, make sure officials can settle concerns without causing headlines about power struggles or, worse,
confused response officials. When all else fails, stay in the scope of one’s responsibility and refrain from declaring “I’m in charge” without being certain that you are.

Even if everyone shows up at the same press conference, officials could send the wrong message to the public. If people are jockeying for the microphone or looking back and forth at each other hoping someone will answer a reporter’s question, the public will be left with the impression that there is confusion and power struggles among the leadership.

Early in the sniper shooting incident in metropolitan Washington D.C., Montgomery County Police Chief Charles Moose formally requested involvement by the U.S. Federal Bureau of Investigation (FBI). Although there were concerns about what that might mean to local law enforcement, the chief chose to involve the FBI and did it quietly and apparently seamlessly, at least to the public. At no time did the public perceive a power struggle among the response agencies.

*A good communications plan can help end turf wars before they start.*

**Five communication successes**

- Manage reputational risk
- Express empathy
- Show competence and expertise
- Remain honest and open
- Demonstrate accountability and commitment

**Manage reputational risk.** Management of your organization’s reputational risk is more critical than ever because of an increasing lack of confidence by the general public; shifting cultural norms; and new, faster communication technologies. Changes
forcing this rethinking include the global explosion of information access, the emergence of a victim culture, a decline in the understanding and reputation of science, and the increase of advocacy groups.

An organization can measure its reputation through the level of stakeholder trust or mistrust. The Ethics Resource Council states that “trust is the natural consequence of promises fulfilled.” Mistrust is an outgrowth of the perception that promises have been broken and values violated. Three important elements: speed of response, avoiding missteps during the crisis response, and asking for forgiveness when mistakes occur go a long way in maintaining and building trust during a crisis response. If an organization and its leaders are unwilling to build and maintain trust with its stakeholders and the general public, then executing any other elements of the communication plan is a wasted effort. Trust is the foundation of crisis and emergency risk communication.

Express empathy. Research shows that an expression of empathy should be given in the first 30 seconds of starting to commu-
nicate. The audience is wondering whether the response official understands that they are frightened, anxious, confused, or angry. If the official doesn’t articulate what the audience or listeners are feeling in the moment, their minds will be consumed with the question: “do they get it” and they will not hear a thing the officials are saying. A sincere expression of empathy early in the communication will allow people to settle down the “noise” in their minds and actually hear what the official has to say.

Caution: It is inappropriate to say “I know how you feel.” That lacks specificity. Officials must take a moment and discern what emotion community members are feeling such as fear, frustration, anxiety, dread or confusion and actually name the emotion. If uncertain say, “I can only imagine I would be feeling pretty frustrated right now” and wait to see if heads start to nod.

Expressing empathy in a crisis situation is not optional, it is a necessity and every credible response official who intends to be a spokesperson must be prepared to sincerely and repeatedly express empathy toward those affected by the event.

**Show competence and expertise.** If an official has a title and is part of the response to a crisis, the public will assume they are competent until something occurs to indicate otherwise. Education, position title, or organizational roles and missions are quick ways to indicate expertise. Previous experience and demonstrated abilities in the current situation enhance the perception of competence. Another useful tool to build trust is to have established a relationship with the audience in advance of the emergency. If that is not possible, seek a third party, who has the confidence of the audience and expresses confidence in the response organization.

**Remain honest and open.** According to recent research, conducted by CDC, communities believe that the U.S. government withholds information. Officials should strive to treat people
as they would like to be treated. It is inappropriate to withhold information based on a well-meaning but misguided desire to protect people or to avoid a bigger problem. The motives may be noble, but the outcome could be the opposite.

Holding back information as a way to “manage” the crisis is not only inappropriate, it is also impractical. With modern information technology, the public can readily find information. Assume that if more than one person knows the fact, everyone knows the fact. Then ask, “Do you want to present the facts in context or do you want to try to clean up a mess of someone else’s making?” Bad news does not get better over time. There is consensus among professionals that the faster one delivers bad news the better, because withholding information implies guilt and arrogance.

Conversely, at times there are good reasons to withhold certain information. When this is the case, respectfully tell the public you are withholding information and why. Caution: If the answer is “because we don’t want you to panic,” then there is no reason to withhold the information. Honesty and openness in crisis communication means facing the realities of the situation and responding accordingly. It means being participatory—giving people choices and enough information to make appropriate decisions. Further, to build trust, the public should be allowed to observe the process while being reminded that this process is what drives the quality of the emergency response.

**Demonstrate Accountability and commitment.** For most people accountability literally means “keeping the books open.” If government or non-profit money is being spent in the response to a disaster, sooner or later the public and media will demand to know to whom that money or those resources are being distributed. Anticipate the questions and have the mechanisms in place to be as transparent as possible, perhaps keeping an accounting on an Internet site related to the disaster and updating
it weekly or monthly as appropriate. To achieve the appropriate degree of openness and empathy requires written policies that are practiced during exercises, and have full commitment from the highest organizational leadership and are modeled during non-crisis situations.
MODULE TWO

Psychology of a Crisis

Human Behavior in an Emergency

Communication in a Crisis is Different

Understanding Concepts of Death and Grief
PSYCHOLOGY OF A CRISIS

Human Behavior in an Emergency

Many of the expected harmful individual and community behaviors can be mitigated with effective crisis and emergency risk communication. Since each crisis will carry its own psychological challenges, the practitioner must anticipate which mental stresses the population will be experiencing and apply appropriate risk communication strategies.

Listen to people. People are often more concerned about issues such as trust, credibility, control, benefits, competence, voluntariness, fairness, empathy, caring, courtesy, and compassion than about mortality statistics and the details of quantitative risk assessment. If people feel or perceive that they are not being heard, they cannot be expected to listen. Effective risk communication is a two-way activity. Do not make assumptions about what people know, think or want done about risks. Take the time to find out what people are thinking: use techniques such as interviews, facilitated discussion groups, advisory groups, toll-free numbers, and surveys. Recognize the “hidden agendas,” symbolic meanings, and broader social, cultural, economic or political considerations that often underlie and complicate the task of risk communication. The negative emotions commonly experienced in a crisis or disaster—left without mitigating communication from a trusted source—may lead to harmful individual or group behaviors that can adversely affect the public’s safety by hampering the speed, quality, and appropriateness of the crisis response and recovery.
Communication in a Crisis is Different

While it can be expected that communication principles apply during a crisis, research has shown that in a dire emergency, people or groups may exaggerate their psychological responses. Some persons may revert to more rudimentary or instinctual “flight or fight” reasoning, caused in part by the increase of adrenaline and cortisol in the blood system.

Decision-making is also affected during a crisis. The following behaviors are commonly exhibited:

**Simplify.** Under intense stress and possible information overload, people will miss the nuances of messages or avoid the effort to juggle multiple facts by simplifying what they’ve heard. To cope, people may not attempt an analytical and reasoned approach to decision-making. Instead, they may rely on habit, long-held traditions, following the lead of others, and such stereotyping as classifying participants as “good” and “bad” guys.
Cling to current beliefs. If your communication requires asking people to do something that seems counterintuitive (e.g., getting out of a safe car and lying in a ditch instead of outrunning a tornado), it may be difficult to change beliefs during a crisis or emergency. People are adept at maintaining faith in their current beliefs. People tend not to seek out contrary evidence. They also exploit the conflicting or contradictory information about a subject by interpreting it as consistent with existing beliefs. (e.g., “I believe that chocolate is good. Some studies say chocolate is bad for your health. Some studies say chocolate is good for your health. I choose to believe that no one knows for sure, and I’ll continue to eat chocolate.”)

Believe assumed, incorrect, or conflicting information. When faced with new risks in an emergency, people must rely on experts. However, the natural give-and-take among experts and their enjoyment of the peer process could leave the public with increased uncertainty and fear. Research indicates that the first message to reach the listener may be the accepted message even though more accurate information may follow. Simplicity, credibility, verifiability, consistency, and speed count when communicating in an emergency. An effective message must be repeated, come from a legitimate source, be specific to the emergency being experienced, and offer a positive course of action.

For example, all risks are not perceived in the same way even if the level of harm is the same. Attributes of the risk will make a difference. People do not like injustice. If they perceive that the risk has been imposed on them, that they have been unfairly singled out to experience the risk, or that a fellow human being deliberately put them in the position to be exposed to the risk, they are likely to perceive the risk with more concern or outrage. Be careful about risk comparisons. Explore both the true risk and the perception of that risk.
Don’t over-reassure. If an emergency event is catastrophic, unexpected, dreaded, unfamiliar, in someone else’s control, morally repugnant, and memorable, expect a strong emotional reaction. However, reassurance can backfire. Tell people how scary the situation is, even though the actual numbers are small, and watch them get calmer.

Even if over-reassurance worked, it is important to remember that an over-reassured public isn’t your goal. You want people to be concerned, vigilant—even hypervigilant at first. You want people to take all available precautions; feel the fear, misery, and other emotions that the situation justifies; follow the crisis without obsessing over it; and still manage to live fairly normally. Over-reassurance is not the way to inspire that calm concern.

Acknowledged uncertainty. Acknowledging uncertainty is most effective when the communicator both shows his or her distress and acknowledges the audience’s distress: “How I wish I could give you a definite answer on that . . .”; “It must be awful for people to hear how tentative we have to be because there is still so much we don’t know . . .”
Give people things to do. In an emergency, simple tasks will give people back a sense of control and will help to keep them motivated to stay tuned to what is happening, and prepare them to take action when directed to do so. Provide people with a choice of actions matched to their level of concern. Offer a range of responses—a minimum response, a maximum response, and a recommended middle response.

Dealing with panic. Panic seldom occurs. The condition most conducive to panic isn’t bad news; it is conflicting messages from those in authority. People are most likely to panic when they feel that they can’t trust what those in authority are telling them or when they feel misled or abandoned in dangerous territory. When people are afraid, the worst thing to do is pretend that they’re not; the second worst thing is to tell them they shouldn’t be. Both responses leave people alone with their fears. Acknowledge fears and give people the information they need to put those fears into context.

Perception of Risk

The perception of risk is also vitally important in emergency communication. Not all risks are created equally. The following demonstrates why some risks are more acceptable than others.

Voluntary versus involuntary: Voluntary risks are more readily accepted than imposed risks.

Personally controlled versus controlled by others: Risks controlled by the individual or community are more readily accepted than risks outside the individual’s or community’s control.

Familiar versus exotic: Familiar risks are more readily accepted than unfamiliar risks.

Natural origin versus manmade: Risks generated by nature are better tolerated than risks generated by man or an institution.
Risks caused by human actions are less tolerated than risks generated by nature.

**Reversible versus permanent:** Reversible risk is better tolerated than risk perceived to be irreversible.

**Statistical versus anecdotal:** Statistical risks for populations are better tolerated than risks represented by individuals. An anecdote presented to a person or community (e.g., “one in a million”) can be more damaging than a statistical risk of one in 10,000 presented as a number.

**Endemic versus epidemic (catastrophic):** Illnesses, injuries, and deaths spread over time at a predictable rate are better tolerated than the aforementioned grouped by time and location (e.g., U.S. car crash deaths versus airplane crashes).

**Fairly distributed versus unfairly distributed:** Risks that do not single out a group, population, or individual are better tolerated than risks that are perceived to be targeted.

**Generated by trusted institution versus mistrusted institution:** Risks generated by a mistrusted institution will be perceived as greater than risks generated by a trusted institution.

**Adults versus children:** Risks that affect adults are better tolerated than risks that affect children.

**Understood benefit versus questionable benefit:** Risks with well-understood potential benefit and the reduction of well-understood harm are better tolerated than risks with little or no perceived benefit or reduction of harm.

The principles of risk communication are vital when developing messages during an emergency. If it’s the first emergency of its type — manmade, imposed, or catastrophic — the communication challenges will increase.
Checklist: Scientific Risk Communication for the Public

Success depends on the interaction of the following factors: pre-existing trust and credibility of the presenting organization; level of foreknowledge in the target audience; message development and spokesperson’s presentation; seriousness or relevance of the information to the target audience; competing points of view (adversaries); and follow-up.

Target Audience Expertise/Psychology

- People act on the information they have, even if it is incorrect
- People take more precautions when they feel threatened or are concerned
- People act rationally to protect themselves, families, and pets
- Beware of stigmatization against products, animals, population groups, and nations
- Find out what the audience knows now and what level of information they want (long-term health issues require more information; short-term crisis health issues require less information and more definitive conclusions)
- Denial is alive and well (threat must be real, imminent, and actionable)
- Understand audience by age/culture/level of experience or familiarity with the subject/language/geographic location

Message Development

- “Alarm” of the day? Be judicious in attempting to educate about risk
• Controversial decisions based on technical data/science must be explained
• Action by public should be voluntary with police power a last resort
• Use third-party validations when possible (consistent message from multiple sources)
• Association, causation, risk factors, adverse risk, relative risk, theoretical risk, etc., all mean something different to scientists but do not to the media/public
• Messages that challenge audience beliefs will be resisted
• Theoretical risks are more distressing than risks stated in whole numbers
• Statistics perceived as manipulated or convoluted will not be trusted
• Anecdotes, scenarios and examples are best way to teach about risk
• Be careful about risk comparisons whose attributes are not similar (e.g., number of vehicle crashes in three weeks in D.C. versus number of sniper shootings)

All Risks Are Not Equal

• The public hates uncertainty
• The public hates not being in control of their well-being and that of their family, and pets
• Socio-economic impacts can skew public reaction (e.g., my livelihood depends on the recreational park remaining open so Eastern Equine Encephalitis in the community may not be a reason to close operations to conduct control measures like aerial spraying for mosquitoes.)
• Types of risks more or less tolerated by the public:
- Voluntary versus involuntary?
- Controlled by self or controlled by others?
- Familiar or exotic? (flu versus SARS)
- Natural origin or manmade? (Earthquake versus business or criminal)
- Reversible or permanent? (Broken leg versus severed leg)
- Statistical or anecdotal? (1 in 10,000 die from anesthesia versus Aunt Mae did from anesthesia)
- Endemic (spread over time) or epidemic (catastrophic) (car crashes versus plane crash)
- Fairly distributed or unfairly distributed (tornado deaths versus terrorist bombing)
- Generated by trusted institution or mistrusted institution (CDC with vaccine shortage versus Drug maker with vaccine shortage).
Human Psychology During a Crisis

The negative effects of traumatic stress disorder in a disaster situation include:

**Emotional effects:** Shock, terror, irritability, blame, anger, guilt, grief or sadness, emotional numbing, helplessness, loss of pleasure derived from familiar activities, difficulty experiencing loving feelings.

**Cognitive effects:** Impaired concentration, impaired decision-making, memory impairment, disbelief, confusion, nightmares, decreased self-esteem, decreased self-efficacy, self-blame, intrusive thoughts/memories, worry, dissociation (e.g., tunnel vision, dreamlike “spacey” feeling).

**Physical effects:** Fatigue, insomnia, cardiovascular strain, startled response, hyperarousal, increased physical pain, reduced immune response, headaches, gastrointestinal upset, decreased appetite, decreased libido, and vulnerability to illness.

**Interpersonal effects:** Increased relational conflict, social withdrawal, reduced relational intimacy, alienation, impaired work performance, impaired school performance, decreased satisfaction, distrust, externalization of blame, externalization of vulnerability or feeling abandoned and rejected, overprotectiveness. Positive responses following a disaster include resilience and coping, altruism, relief and elation at surviving the disaster, sense of excitement and greater self-worth, changes in the way the future is viewed, and feelings of strength and growth from the experience.
Understanding Concepts of Death and Grief

In a catastrophic event in the United States, communities or the nation may face what experts call “death out of time.” The death of someone who is not advanced in age and sickly (e.g., the death of a child) can be much more difficult to cope with. Spokespersons communicating to an individual or community experiencing the extreme pain and grief that accompanies loss through death must be especially aware of how this grief is suffered. Grief is experienced in a broad social context. The view of a particular society, culture, or subculture with its expectations of “appropriate grieving” influences the experience of loss and the “performance” of grief for those in that society.

Grief is a universal emotion, but no two people experience grief in exactly the same manner. This process, which includes the following.

Bereavement is the state that results from a significant loss and encompasses a wide range of reactions—emotional, cognitive, spiritual, behavioral, and physical. Bereavement is a normal, natural experience, although it is traumatic and emotionally disruptive.
**Grief** refers to the intrapsychic process of regaining equilibrium after a loss. Manifestation includes emotional catharsis and obsessive thoughts of the deceased. Re-evaluating spiritual issues and physical symptoms may also be occurring.

**Mourning** is the public expression or sharing of the feelings of grief. Such rituals as funeral services or the wearing of black are expressions of mourning.

**Anticipatory** grief is an experience that occurs before the expected death of a loved one and is a projection of emotional pain and the life change that the loss will bring. Growth should be the outcome of the grief process. The individual and the context of the death will affect the grief process. Conclusively, use “death” or “dying” not softer euphemisms. Many people feel patronized by words like “expired” or “received his heavenly reward.” Use the same words as the grieving person to respect cultural differences.

Avoid sharing your personal experiences of death and grief so you can keep the focus on the family member. And, be careful to avoid sending signals that you are distracted or need to do something else such as glancing at papers, your watch, the elevator, the clock, or others in a conversation. Focus on the person and speak gently and without haste. Finally, offer support—don’t wait to be asked.
MODULE THREE

Messages and Audiences

✓ How Audiences Judge Messages in a Crisis
✓ Organizing Information
✓ Audience Feedback
MESSAGES AND AUDIENCES

How Audiences Judge Messages in a Crisis

The receiver of your communication will be judging the content of the message, the messenger, and the method of delivery. Each of these aspects must be considered in planning for crisis and emergency risk communication. Remember the basics when creating your messages. Audience segmentation and demographics are still relevant during a crisis. Always consider the following:

- Education
- Current subject knowledge and experience
- Age
- Language spoken/read
- Cultural norms
- Geographic location

Expect your audiences to immediately judge the content of your message in the following ways:

**Speed of communication.** Was the message timely? Also, the speed with which you respond to the public can be an indicator of how prepared you are to respond to the emergency, that there is a system in place, and that needed action is being taken. This doesn’t necessarily mean having all the answers; it means having an early presence so the public knows that you are aware of the emergency and that there is a system in place to respond.

**Factual content of the message.** The public will be listening for factual information, and some will be expecting to hear a recommendation for action. Get the facts right, repeat them consistently, avoid sketchy details early on, and ensure that all
credible sources share the same facts. Speak with one voice. Again, preparation counts.

Trust and credibility of the message. There are four basic elements to establishing trust and credibility through communication. All messages, written or spoken, can incorporate these elements and should, especially when attempting to communicate during an emergency.

Empathy and caring should be expressed within the first 30 seconds. Being empathetic and caring provides a greater opportunity for your message to be received and acted upon. Acknowledge fear, pain, suffering, and uncertainty.

Competence and expertise are best displayed by previous experience and demonstrated abilities in the current situation. Another useful means is to have established a relationship with your audiences in advance of the emergency.

Honesty and openness does not mean releasing information prematurely, but it does mean facing the realities of the situation and responding accordingly. It means not being paternalistic in your communication but, instead, participatory—giving people choices and enough information to make appropriate decisions.

Commitment and dedication means stating up front what your organization’s objective is in this emergency response, and commit to reaching that objective. Show dedication by sharing in the sacrifices and discomforts of the emergency. Don’t fake hardship for the cameras.
Organizing Information

Public health emergencies come in various sizes and durations. After the initial response, health officials and emergency responders may need to provide updates or background information to community leaders, Congress, or citizen forums. They may also have to explain certain recommendations made at each step of the recovery effort. Depending on the purpose of the presentation and any expected resistance to the message, the pattern in which you choose to present the information can help open your audience to receiving it. A careful arrangement of your key ideas goes a long way toward helping your audience understand your message.

Sharing new information when facing little or no resistance. Consider first using the direct pattern which presents your main idea or conclusion. The idea is then developed with supporting information. If you save the big idea until last, you may increase expectations. You can lower expectations by declaring the expected outcome first.
**Progress reports.** Often, progress reports are best organized chronologically. This helps the listener follow where you’ve been and where you’re going. This technique can be overused, especially if these are frequent updates. It is a useful pattern if your listeners need to understand the ongoing development of your ideas. You may also wish to consider a priority order pattern for progress reports.

**Problem-solving.** If your presentation is meant to offer a solution to a problem, the criteria-application pattern is a strong approach. Early in the presentation, criteria or standards for evaluation are suggested. Then, solutions or choices are compared against those standards. This approach highlights your underlying reasoning and can be very convincing as long as the audience agrees with your decision criteria. The criteria should describe the best possible case, then explore the available alternatives.

**Explain why something happened.** A cause-effect pattern for your presentation can explain how something occurred or predict the consequences of an action. It’s easy to confuse cause and effect, so apply this pattern carefully. Causality is not always clear. Be careful not to simplify your conclusions or make them too optimistic.

**Audience Feedback**

In pre-event planning, identify the mechanisms you will use to obtain and analyze feedback from target populations. In addition, state how this information will be used in reassessing your communication and response operations. Be sure that there are open channels between the public and your organization and solicit public feedback. Toll-free public information lines, an e-mail address, and a “snail mail” address for comments should be provided to the public before and during the emergency. The more public outrage the event generates the more opportunities
people will need to vent. That venting can be valuable to you as a communicator. It will tell you what questions they want answers to, what upsets them, what needs more explanation, and which recommendations are not working.
Figure 1–3. Message development for emergency communication

CERC: First Message
Build credibility with these six emergency message components.

1. Expression of empathy (e.g., I understand you are hurt, confused, anxious, frightened):

2. Clarifying facts (Fill-in only VERIFIED facts, skip if not certain):
   - Who ___________________________________________
   - What ___________________________________________
   - Where __________________________________________
   - When ___________________________________________
   - Why ___________________________________________
   - How ___________________________________________

3. What we don’t know:

4. Process to get answers:

5. Statement of commitment:

6. Referrals (If possible, skip if not yet ready):
   - For more information _____________________________
   - Next scheduled update ___________________________
MODULE FOUR

Crisis Communication Plan

✓ Developing Your Crisis Communication Plan

✓ Nine Steps of Crisis Response
Developing Your Crisis Communication Plan

The crisis communication plan must be planned with the worst case scenario in mind and should be fully integrated into the overall emergency response plan for the organization and the local, state, or national response plan. The plan is not a step-by-step “how to.” It is the bones of your work. It should systematically address all of the roles, lines of responsibility, and resources you are sure to encounter as you provide information to the public, media and partners during a public health emergency.

More than anything, your crisis communication plan is a resource of information—the “go to” place for must-have information.

An emergency risk and crisis communication plan should include the following elements.

- Signed endorsement from your director
- Designated line and staff responsibilities for the public information teams
- Internal information verification and clearance/approval procedures
- Agreements on information release authorities (who releases what/when/how)
- Regional and local media contact list (including after-hours news desks)
• Procedures to coordinate with the public health organization response teams

• Designated spokespersons for public health issues and third-party validators in an emergency

• Your organizations emergency response team after-hours contact numbers

• Contact numbers for emergency response information partners (e.g., Governor’s public affairs officer, local FBI public information special agent in charge, local or regional department of agriculture or veterinarian public information officers, Red Cross, and other nongovernmental organizations)

• Agreements/procedures to join the joint information center of the emergency operations center (if activated)

• Procedures to secure needed resources (space, equipment, people) to operate the public information and media operation during a public health emergency 24 hours a day/7 days a week, if needed

• Identified vehicles of information dissemination to public, stakeholders, partners (e.g., e-mail listservs, broadcast fax, door-to-door leaflets, press releases) during a crisis
Nine Steps of Crisis Response

Step 1. Verify situation. Get the facts.

Step 2. Conduct notifications. It is essential for you to carefully think through who should be notified in your chain of command, up to what appropriate level, and within the scope of your organization.

Step 3. Conduct crisis assessment (activate crisis plan). Throughout the event, continue to gather information; try to determine the severity of the situation and the potential impact on communication operations, resources, and staffing. This requires swift and active research.
Step 4. **Organize assignments.** Determine who is managing the event programmatically/scientifically.

Step 5. **Prepare information and obtain approvals.** This function includes all message and materials development activities, the approval process, and the coordination of information within your organization.

Step 6. **Release information to media, public, and partners through arranged channels.**

Step 7. **Obtain feedback and conduct crisis evaluation.** As soon as is feasible following a crisis, conduct an evaluation of the organization’s response.

Step 8. **Conduct public education.** Once the crisis has subsided, the organization may need to carry out additional public education activities.

Step 9. **Monitor events.**
MODULE FIVE

Working with the Media

✓ What Do Reporters Want?
✓ Conducting a Successful Press Conference
✓ The Role of the Spokesperson
✓ Responding to Media Regarding Egregious Errors, Myths, and Misperceptions
WORKING WITH THE MEDIA

What Do Reporters Want?

Major public health emergencies will instantly engage the media, especially if they are exotic, catastrophic, or first of their kind. To add a little perspective, emergency response would be considerably hampered if media were not involved—the absence of mass media would make it nearly impossible for EOC and public officials to communicate the nature of the crisis and the appropriate actions citizens should take to mitigate morbidity and mortality.

The quickest way to destroy your relationship with the media is to ignore the finite aspects of their job—they have space and time to fill and deadlines to meet. Know those deadlines and work to accommodate them. During a crisis, be available—if necessary, around the clock—to help reporters get the facts and get them right, before deadline. Attempt to give media a reasonable expectation of when new information will be provided and, as quickly as possible, establish a schedule for information releases.
Don’t ignore local media in favor of the national media and the well-known names. National media have contacts outside the local area to fill in much of what they need. They won’t be shortchanged. Local media are counting on local response officials to work with them, and you should. If you are the public information official at the local level, think local media.

Questions at the top of the list in an emergency include the following.

- Who is in charge here?
- How are those who got hurt getting help?
- Is this thing being contained?
- What can we expect?
- What should we do?
- Why did this happen? (Don’t speculate. Repeat the facts of the event, describe the data collection effort, and describe treatment from fact sheets.)
- Did you have forewarning this might happen?
- Why wasn’t this kept from happening (again)?
- What else can go wrong?
- When did you begin working on this (e.g., were notified of this, determined this . . . )?
- What do these data/information/results mean?
- What bad things aren’t you telling us? (Don’t forget the good.)
Conducting a Successful Press Conference

Press conferences are best held on the site of the emergency, if it lends itself to a media event (e.g., it’s safe for the media to be there, it won’t interfere with recovery efforts, or would not violate the privacy of victims of the emergency).

Invite print and electronic media, and don’t forget radio stations. If the EOC is hosting a press room, be sure to post a notice in that room too. Attempt to limit the number of emergency response officials attending who will not have a speaking role.

Give the media as much advance notice as possible. An hour is the absolute least amount of time from notice to the event, unless media are all standing by waiting for a comment.

Keep the speakers out of the room until the event begins—you don’t want the negotiations about logistics and the order of speakers being worked out in public. Do that in private. The instant that the principals are visible to the media, their demean-
or and behavior is a matter of public record. It’s natural to blow off a little steam, joke around, even during the heat of a crisis. Your officials need to be able to do that away from the cameras. Respect that need.

The Role of the Spokesperson

The spokesperson brings the organization to life. He or she literally embodies the organization and gives it its human identity. A spokesperson takes the organization from an “it” to a “we,” and is the conduit to various audiences so the organization does not have to rely entirely on the written word.

Insist that spokespersons are trained. No person should represent the entire organization unless they have invested time and energy in developing the skills of an effective spokesperson. It’s not about the color of a tie or scarf one wears on television, but the ability to effectively connect with the audience, either through the media or in person. It’s sometimes difficult to capture the qualities of a good spokesperson and pass them on to others.
However, it’s not at all difficult to identify the qualities of a poor spokesperson. Nearly all spokesperson training starts or ends with this statement: “Be yourself. Be natural.” That may not always be the best advice. The audience can tell when the persona appears stilted or fake. But “be natural” doesn’t mean forgetting the seriousness of your role. Perhaps better advice is “Be your organization. Act like your organization.” Every organization has an identity. A spokesperson should try to embody that identity.

**General recommendations for spokespersons in all settings:**

- Know your organization’s policies about the release of information.

- Stay within the scope of your responsibilities, unless you are authorized to speak for the entire organization or a higher headquarters.

- Don’t answer questions that are not within the scope of your organizational responsibility.

- Tell the truth. Be as open as possible.

- Follow up on issues.

- Use visuals when possible.

- Illustrate a point through examples, stories, and analogies. Ensure that they help you make your point and do not minimize or exaggerate your message. Try the stories out on a small group first.

**Pitfalls for spokespersons during an emergency:**

- Remember that jargon obfuscates communication and implies arrogance. If you have to use a technical term or acronym, define it. If you can define it, do you need to use it? Jargon and euphemisms are security blankets. Try to give yours up.
• Use humor cautiously. Humor is a minefield. Soft, self-deprecating humor may be disarming for a hostile audience, but be careful.

• Refute negative allegations without repeating them. Don’t own the negative by repeating the accusation.

• When possible, use positive or neutral terms.

• Don’t assume you’ve made your point. Ask whether you’ve made yourself clear.

• Ultimately, money will become an issue. During the early stage of an emergency, don’t lead with messages about money.

• At all costs, avoid one-liners, clichés, and off-the-cuff comments. Any statement that trivializes the experience of the people involved by saying something such as “there are no guarantees in life” kills your credibility.

• Discuss what you know, not what you think.
Figure 1–5. Spokesperson pocket guide

CRISIS + EMERGENCY RISK COMMUNICATION

Build Trust and Credibility
- Empathy and caring
- Competence and expertise
- Honesty and openness
- Commitment and dedication

Top Tips
- Don’t over reassure
- Acknowledge uncertainty
- Express wishes (“I wish I had answers.”)
- Acknowledge people’s fears, give people things to do
- Ask more of people (share risk)

Prepare to Answer These Questions
- Are my family and I safe?
- What can I do to protect myself and my family?
- Who is in charge?
- What can we expect?
- Why did this happen?
- Were you forewarned?
- Why wasn’t this prevented?
- What else can go wrong?
- When did you begin working on this?
- What does this information mean?

As a Spokesperson
- Know your organization’s policies
- Stay within the scope of responsibilities
- Tell the truth, be transparent
- Embody your agency’s identity

Stay on message
- “What is important to remember is …”
- “I can’t answer that question, but I can tell you …”
- “I want to tell your viewers …”
- “Allow me to put this in perspective …”

BE FIRST. BE RIGHT. BE CREDIBLE.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention
Responding to Media Regarding Egregious Errors, Myths, and Misperceptions

First, calm down. Remember, when you talk to the media, you are speaking for your agency or organization. No matter how angry you are, you cannot react thoughtlessly and attack the reporter.

Analyze the situation. Is the publication, television, or radio program credible? Have you worked with the offending reporter previously? Expressing your complaint to someone who knows you, and knows you are credible, is easier and more productive.

Was there truly an inaccuracy, or did the reporter simply present the facts with a negative slant? Correcting a factual error is relatively simple and straightforward. However, a difference of opinion about a subject is not as easy to counter.
CONCLUSION

Communicating in a crisis is different. In a serious crisis, all affected people take in information differently, process information differently and act on information differently. Treat the public like intelligent adults and they will act intelligently. Treat them any other way and they will either turn on you or behave in ways that seem illogical to you. Remember, you are a public leader. Tell people what they need to know so they can make the decisions that are right for them and their families. Never tell people “don’t worry. If you engage the public in the process, they will follow your lead.

Working from a communication plan is as important in a crisis as working from a logistics plan. The single most important responsibility that can be assigned to someone in your organization is the duty to keep the plan alive. Update the plan regularly—all of the elements. Schedule the review; don’t wait for so many changes to occur that the plan is useless when you take it off the shelf.

During any crisis, your message should utilize the STARCC Principle:

**Simple**—Frightened people don’t want to hear big words

**Timely**—Frightened people want information NOW

**Accurate**—Frightened people won’t get nuances, so give it straight

**Relevant**—Answer their questions and give action steps

**Credible**—Empathy and openness are key to credibility

**Consistent**—The slightest change in the message is upsetting and dissected by all
And, finally always adhere to the six principles of CERC:

Be First. If the information is yours to provide by organizational authority—do so as soon as possible. If you can’t provide the information, then explain how you are working to get it.

Be Right. Give facts in increments. Tell people what you know when you know it, tell them what you don’t know, and tell them if you will know relevant information later.

Be Credible. Tell the truth. Do not withhold to avoid embarrassment or the possible “panic” that seldom happens. Uncertainty is worse than not knowing. Remember, rumors are more damaging than hard truths.

Express Empathy. Acknowledge in words what people are feeling—it builds trust.

Promote Action. Give people things to do. It calms anxiety and helps restore order.

Show Respect: Treat people the way you want to be treated, even when hard decisions must be communicated.

This quick guide has covered only the most basic tenets of CERC. For more information about CERC send your email message to: CERCINFO@cdc.gov