

Exercise 2, Part 1: Messages and Audiences

Directions: *Divide into small groups. On your own, read the scenario below and the main message points that a state public health official is considering using to develop the first press statement released at 1 p.m. (Note: The official has more information about the event than is provided below. The scenario is simply meant to provide you with a very brief synopsis of the event.) After you read the information below, take about 10 minutes and please do the following with the other members of your group:*

- *Use the Message Development for Emergency Communication tool on the following page to “rate” this group of message points in terms of appropriateness and whether they cover the six basic emergency message components.*
- *Decide whether you think this set of messages is adequate or needs improvement.*
- *If the set of messages needs improvement, what are other message points that you would add or how would you change the existing ones?*

Sarin Chemical Release

October, Houston: At noon, the Galleria mall security manager called 911 and said that people inside are gasping for air and convulsing. It appears, from multiple reports, that people in the mall parking lot are also convulsing and asphyxiating. First responders are exhibiting similar symptoms. Footage from hospitals is being shown on television. Communities around the mall are self-evacuating. A KPRC-TV reporter was contacted by a caller who claims to have released a nerve agent at the mall. A couple of hours later, a preliminary report is that 400 people are dead and that more than 2,000 people in the surrounding area have been affected by the release. Media reports include rumors of widespread panic.

Proposed message points:

- There was a Sarin gas release at the Galleria mall in Houston, TX, at noon today.
- An unidentified caller who contacted KPRC-TV claims that this is a bioterrorism event, although we do not know at this time what terrorist group committed this act. We have no evidence at this time that additional acts of terrorism are planned either in Houston or in other parts of the country.
- This is a terrible act and we will do everything we can to provide you with the information you need for your and your family’s health as soon as possible.
- Sarin is a nerve gas, which can be deadly, but only for those directly exposed to high concentrations of the gas. We are in the process of talking with medical and environmental experts to see if people in close proximity to the mall should evacuate and should be able to tell people what they should do within the hour.
- Victims are being taken to area hospitals. At this time we do not know how many people are sick or dead and do not wish to speculate.

Message Development for Emergency Communication

First, consider the following:

Audience:	Purpose of Message:	Method of Delivery:
<input type="checkbox"/> Relationship to event <input type="checkbox"/> Demographics (age, language, education, culture) <input type="checkbox"/> Level of outrage (based on risk principles)	<input type="checkbox"/> Give facts/update <input type="checkbox"/> Rally to action <input type="checkbox"/> Clarify event status <input type="checkbox"/> Address rumors <input type="checkbox"/> Satisfy media requests	<input type="checkbox"/> Print media release <input type="checkbox"/> Web release <input type="checkbox"/> Spokesperson (TV or in-person appearance) <input type="checkbox"/> Radio <input type="checkbox"/> Other (e.g., recorded phone message)

Six Basic Emergency Message Components:

1. Expression of empathy:

2. Clarifying facts/call for action:

Who _____

What _____

Where _____

When _____

Why _____

How _____

3. What we don't know: _____

4. Process to get answers: _____

5. Statement of commitment: _____

6. Referrals:

For more information _____

Next scheduled update _____

Finally, check your message for the following:

Positive action steps	Avoid jargon
Honest/open tone	Avoid judgmental phrases
Applied risk communication principles	Avoid humor
Test for clarity	Avoid extreme speculation
Use simple words, short sentences	

Exercise 2, Part 2: Messages and Audiences

Directions: *Divide into small groups. On your own, read the scenario below and the main message points that a state public health official is considering using to develop for a press statement to be released on Sunday night. (Note: The official has more information about the event than is provided below. The scenario is simply meant to provide you with a very brief synopsis of the event.) After you read the information below, take about 10 minutes and please do the following with the other members of your group:*

- *Use the Message Development for Emergency Communication tool on the following page to “rate” this group of message points in terms of appropriateness and whether they cover the six basic emergency message components.*
- *Decide whether you think this set of messages is adequate or needs improvement.*
- *If the set of messages needs improvement, what are other message points that you would add or how would you change the existing ones?*

West Nile Virus

August, New York City: New York City neurologists identify a cluster of elderly patients with severe encephalitis and symptoms that include weakness or paralysis of the lower limbs. The fatality rate among the identified patients is nearing 50 percent. The state receives preliminary test results from CDC identifying St. Louis Encephalitis and has begun mosquito abatement efforts. On Friday, CDC arbovirus scientists tell CDC leadership that that the virus may, in fact, not be SLE, but West Nile Virus. They expect final test results during the weekend. The change of diagnosis from SLE to WNV would not change the treatment or control measures being taken by NYC. On Saturday night, a collaborating university laboratory breaks the news through *The New York Times* online that the disease is, in fact, WNV. It’s Sunday and the media have heard the change of diagnosis and rumors that the outbreak is being investigated by federal agencies as a possible bioterrorism event.

Proposed message points:

- There are several patients in New York City who have tested positive for a mosquito-borne virus. Initial reports indicate that the virus is St. Louis Encephalitis, but the CDC is doing further testing to determine whether this may be West Nile Virus. Final test results should be available from the CDC within the next day.

- The mosquito control measures for both viruses are the same. Since the first case was discovered, the affected areas in the city have been sprayed regularly with insecticides and this will continue.
- The public should know that the risk of contracting a virus from a mosquito bite is small. The people most often affected are those with comprised immune systems, such as the elderly. The public can take several measures to prevent contracting any mosquito-borne virus. Eliminating standing water on your property, using mosquito repellent, and wearing long pants and long-sleeved shirts when outdoors at dawn and dusk are effective preventative measures.
- At this time, we believe that this is a natural occurrence of the West Nile Virus. It is very similar to other outbreaks that have occurred in several areas of the country over the past few years.

Message Development for Emergency Communication

First, consider the following:

Audience:	Purpose of Message:	Method of Delivery:
<input type="checkbox"/> Relationship to event <input type="checkbox"/> Demographics (age, language, education, culture) <input type="checkbox"/> Level of outrage (based on risk principles)	<input type="checkbox"/> Give facts/update <input type="checkbox"/> Rally to action <input type="checkbox"/> Clarify event status <input type="checkbox"/> Address rumors <input type="checkbox"/> Satisfy media requests	<input type="checkbox"/> Print media release <input type="checkbox"/> Web release <input type="checkbox"/> Spokesperson (TV or in-person appearance) <input type="checkbox"/> Radio <input type="checkbox"/> Other (e.g., recorded phone message)

Six Basic Emergency Message Components:

1. Expression of empathy:

2. Clarifying facts/call for action:

Who _____

What _____

Where _____

When _____

Why _____

How _____

3. What we don't know: _____

4. **Process to get answers:** _____

5. **Statement of commitment:** _____

6. **Referrals:**

For more information _____

Next scheduled update _____

Finally, check your message for the following:

Positive action steps	Avoid jargon
Honest/open tone	Avoid judgmental phrases
Applied risk communication principles	Avoid humor
Test for clarity	Avoid extreme speculation
Use simple words, short sentences	

Exercise 4: Risk Communication Assessment

- _ Initial assessment of the intensity of a crisis event is vital.
- _ First, turn to the event assessment checklist on the following page and check the boxes that are applicable to your event.
- _ Don't spend a lot of time considering whether or not to check a box—this matrix is meant to be a general guide.
- _ This is not a test and there are no right or wrong answers.
- _ The checklist is meant to take a only few minutes to complete.
- _ When you are done, turn back to this page, and compare the boxes you checked to those cited in the “Crisis Criteria” column in the table below to determine the level of crisis that you are dealing with and how you may want to respond.

Reassessment is expected as more information about the event is gathered.

Event Evaluation Factors			
Crisis Level	Crisis Description	Crisis Criteria	Recommended Outcome*
A	Highly intense in the initial phase. The need to disseminate information rapidly to the public and media is critical. Life and limb will be at risk if the public is not notified about the risk and public health recommendations.	<i>First box must be checked. From among boxes 2, 3, and 4, at least two boxes <u>must</u> be checked.</i>	Operate 24 hours a day, 7 days a week for media and public response, with an expectation that relief and replacement staff will be needed. Per your plan, form or join a Joint Information Center (JIC).
B	Intense. The need to directly provide public health recommendations to the public and media to save life or limb is not immediate. The public and media, however, believe their health and safety are or could soon be at risk. There is a high and growing demand for more information.	<i>First box <u>not</u> checked, and third and fourth boxes checked.</i>	Operate 20 hours a day, 7 days a week during the initial phase. Set up routine times for media briefings, allow public to e-mail or leave phone messages during nonduty times, and move into maintenance phase when possible. Be prepared to face “initial phase” demands, depending on developments during the maintenance phase (maintenance phases with bumps). May need to form a JIC.
C	Moderately intense. Media frenzy develops. Interest is generated because of the event novelty versus a legitimate and widespread or immediate public health concern. Interest could die suddenly if a “real” crisis occurred.	<i>Third box checked, and boxes 1, 2, and 4 <u>not</u> checked. Three or more of the ++ boxes checked, and one or more of the +++ boxes checked.</i>	Operate 10–12 hours a day, 5–6 days a week and assign a single team member for after-hour purposes during the initial phase. Operate on weekend if event occurs on a weekend; otherwise use on-call staff only on weekends, not during full operation. Attempt to move the media and public to maintenance phases with prescribed times and outlets for updates. No need to form a JIC.
D	Minimally intense. Builds slowly and may continue for weeks, depending on the outcome of further investigation. Requires monitoring and reassessments.	<i>Boxes 1, 2, and 3 not checked. More + or ++ boxes checked than +++ boxes.</i>	Operate normally in the initial phase while preparing to move to 24 hours a day, 7 days a week, if needed. Notify relief and replacement staff that they may be called for duty depending on how the event develops. Do not “burn out” staff with long hours before the public and media demand escalates. Practice your crisis communication operations (during normal duty hours) to ensure the system works. Consider operating a JIC if information release is shared.

* Public and media emergency communication response recommendations, based on crisis level. Remember with reassessments an ongoing event may move from one level to another.

Mini-Scenarios for Risk Communication Assessment

Pandemic Influenza

September, Ontario, Canada: Health Canada informs CDC that an influenza-like illness is sweeping the province. The infection rate is nearing 30 percent with a 4 percent fatality rate among ill persons. The fatality rate is not age-specific: young healthy adults and older persons are dying from complications of the influenza illness at a nearly equal rate. Almost all who are incubated for 4 days or more die. Antivirals have limited benefit if taken soon after symptoms develop. Health Canada has identified it as an influenza virus (Type A), but the strain does not match any of its reference strains. CDC determined that the illness is influenza, but a novel strain that is highly virulent and is easily transmitted from person to person. This year's production of influenza vaccine is nearly completed and is not protective against this strain. Annually in the United States, approximately 20,000 people die from influenza complications. The CDC predicts that as many as 150,000 Americans could die from this new strain during the first wave of infections this fall and winter. CDC mobilizes its pandemic response team.

vCJD

April, Florida: The Florida Department of Health and the CDC are investigating a likely case of new variant Creutzfeldt Jakob disease (vCJD) in a 22-year-old citizen of the United Kingdom living in Florida. If confirmed, this would be the first case of vCJD reported in a U.S. resident. However, because the disease is thought to have a long incubation period, CDC believes the patient acquired the disease while living in the United Kingdom. Preliminary analysis of information provided by the United Kingdom indicates that the patient's clinical condition and history are consistent with vCJD acquired in the United Kingdom. However, the only way to confirm a diagnosis of vCJD is through a study of brain tissue obtained by a brain biopsy or at autopsy.

New variant vCJD is a rare, degenerative, fatal brain disorder that emerged in the United Kingdom in the mid-1990s. The disease is thought to result from consumption of cattle products contaminated with an agent that causes bovine spongiform encephalopathy (BSE, commonly known as mad cow disease). To date, the USDA has not identified any cases of this cattle disease in the United States.

Dirty Bomb

New Year's Eve, Seattle: Israeli security, the month prior, arrested a man linked to suspected terrorist Osama bin Laden armed with a radiological bomb, as he attempted to enter Israel from the Palestinian territories via a border checkpoint at Ramallah. The National Council on Radiation Protection and Measurements claimed that contamination from this attack would have likely extended to several city blocks and that radiation would have been "catastrophic but manageable." A "dirty bomb" (as it has been referred to by news media) could be constructed by wrapping a conventional high explosive with some radioactive material and detonating the explosive in a manner that would spread contamination over the widest possible area. Pentagon terrorism expert, Peter Probst, described a radiological bomb as a device with a small explosive core encased in radioactive material. "It would not kill a great many people, but it would contaminate a considerable area with radiation," he said. A dirty bomb should not be confused

with a nuclear explosion. A nuclear explosion occurs when two subcritical masses of weapons-grade material are thrust suddenly together, triggering a violent chain reaction and a release of energy. On New Year's Eve, an explosive device detonated near the Seattle Space Needle in the midst of the holiday crowd. Seven people were fatally injured and more than two dozen have been reported injured. Local law enforcement agents were equipped with radiation detection devices. Preliminary reports are that more than one official detected radiation around the explosion site. Federal radiation experts are en route.

