Communicating uncertainty

Lessons from global outbreaks and emergencies
Back in 2017 we reviewed the evidence on communicating uncertainty: the first systematic assessment of the evidence for effective risk communication drawn from emergencies of the last decade...
Ebola Sierra Leone 2014: People were hungry for facts about the disease and advice about protective behaviours. A misinformation epidemic was raging...
2015 MERS outbreak in Korea: risk communication failures augmented spread
What did we find?

Effective risk communications needs to focus on 3 main areas:

1. **Building trust and engaging with affected populations**
2. Integrating emergency risk communications into health emergency responses
3. Applying evidence to planning, monitoring, messaging and use of communication channels
Building trust

Based on the evidence it was recommended that: ‘to build trust, risk communication interventions should:

• Link to functioning and accessible services
• Be transparent, timely, easy to understand
• **Acknowledge uncertainty**
• Address affected populations
• Link to self efficacy
• Be disseminated using multiple platforms, methods and channels
A few lessons on communicating uncertainty from the COVID-19 pandemic

• 1. Never be proscriptive (e.g., black and white statements like ‘spread only occurs in x manner or at y time’. With a new virus we simply do not know this)

• 2. Always say up front that it is a new situation and knowledge is evolving—this is what we have learned so far— but this can change. Remember: what you say early on will come back to haunt you

• 3. Show what you/ your team have done so far to understand what is going on, and what you are going to do to find out. Explain in pictures, graphs etc what the current state of knowledge is.

• 4. Avoid the ‘trust me I’m a doctor, finger wagging, dimagogic -style. You want your message to be we are in this together, we will work together to understand and beat this

• 5. Finally: listen, listen, listen, and keep on listerning!
A few messages about messaging...

• Think about your audience- know who they are and why you are trying to reach them
• Risk should not be explained in technical terms (e.g. don’t go into numbers if possible...)
• Consistent messages should come from different information sources and emerge early in the outbreak
• Messages should promote specific actions people can realistically take to protect their health
• Messages should be pretested to ensure they are culturally acceptable where possible
• Messages should be reviewed and reshaped as the emergency evolves
A few more tips...Do

• Be **first**, be **fast**, be **frequent** with information for the public and use a range of channels/media to spread it...

• Admit what you currently know **AND** what you do not know- and what you are doing to learn more...

• Give practical, **actionable advice** not generalities

• Choose a trusted **spokesperson**- ideally NOT a politician. The public trusts **technicians and scientists** much more...

• Identify and **build links with communities** likely to be affected BEFORE outbreaks...

• Test test test...not only think about but ASK your audience if your messages/advice make sense or work for them

• **Practice, practice, practice**. Simulation exercises, desktop exercises -and include media representatives to learn from and build trust with each other...