



“Why don’t they just do what we tell them?”

Risk Communication in the time of COVID-19

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1




Agenda

1. Risk Perception and Behavior
2. Risk and Crisis Communication
3. Risk Communication and COVID-19
4. SARS-CoV-2 Vaccine Hesitancy
5. Communicating about Vaccine Hesitancy

2

Resistance to Risk

- ✕ Don't Like Risk
- ⚡ Heart Attack
- 🚗 Better Driver

3

Where Does This Come From?

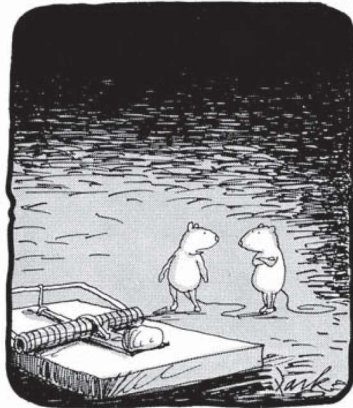
UNREAL
OPTIMISM OR
OPTIMISM
BIAS

Nope.

Not me.

No way.

4



"Modern technology being what it is, there's a good chance it won't work anyway."



Attenuation of Risk

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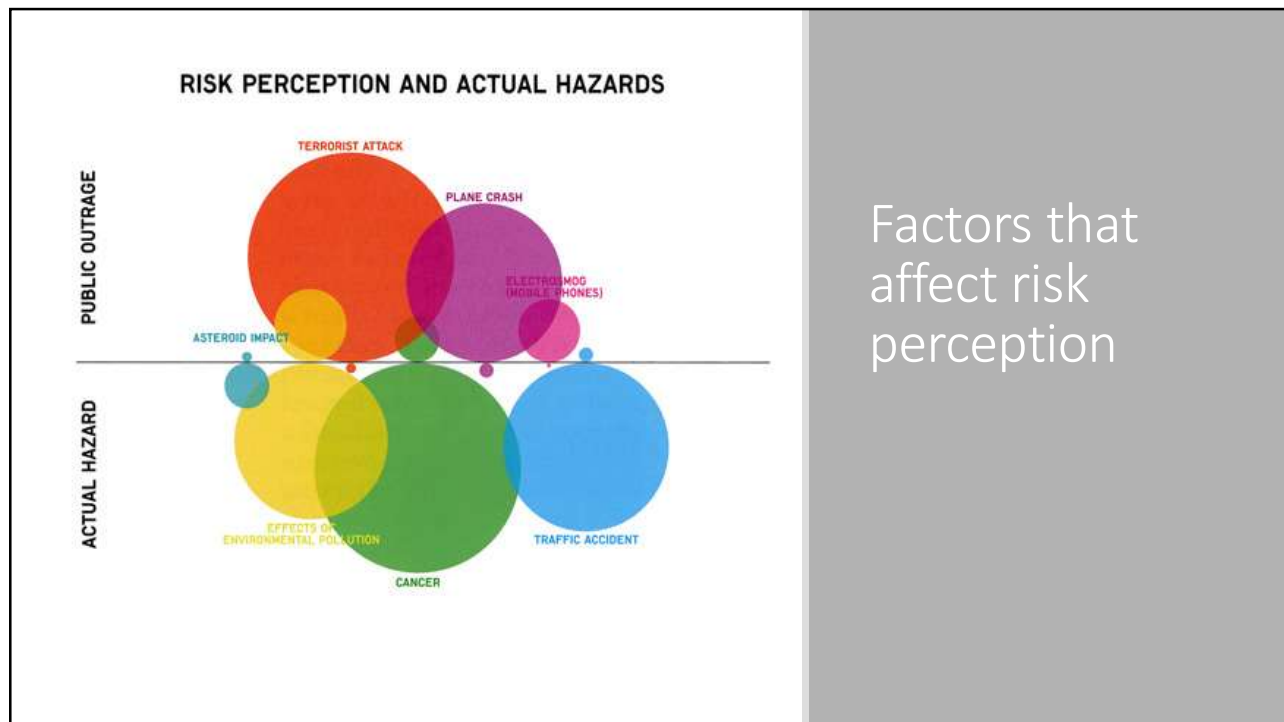
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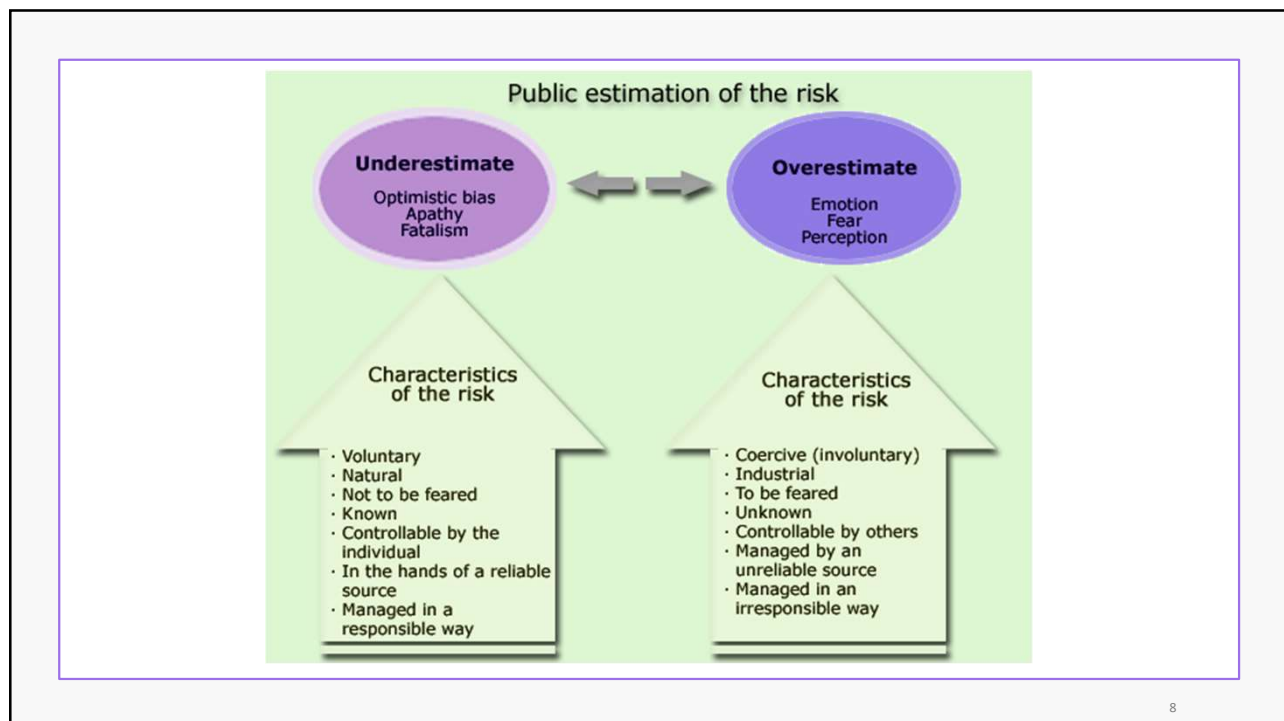
Creates an Important Divide

6

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Control and Choice



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New and “Exotic”



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Possibility of personal impact



Concentration of COVID-19 Cases
BY NYC ZIP CODE



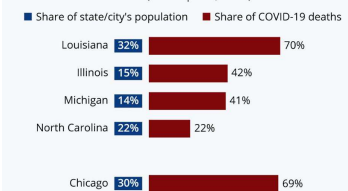
11

Trust and Fairness



COVID-19's Devastating Impact On African Americans

African American share of state/city populations and COVID-19 deaths (as of Apr 06, 2020)



Sources: 2010 Census, respective state/city health departments



Forbes statista

12

Process

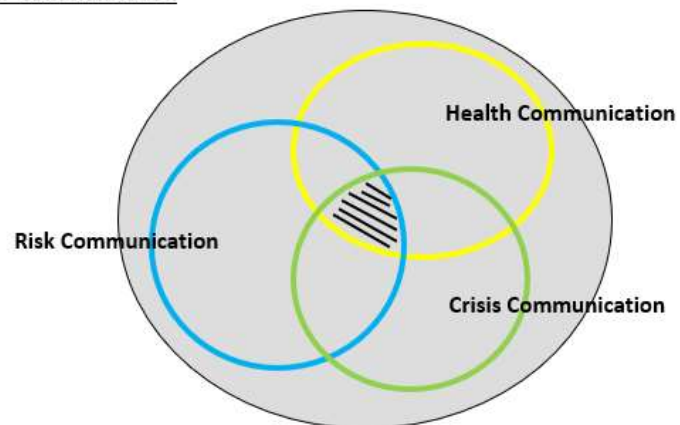


13

Health, Risk and Crisis Communication

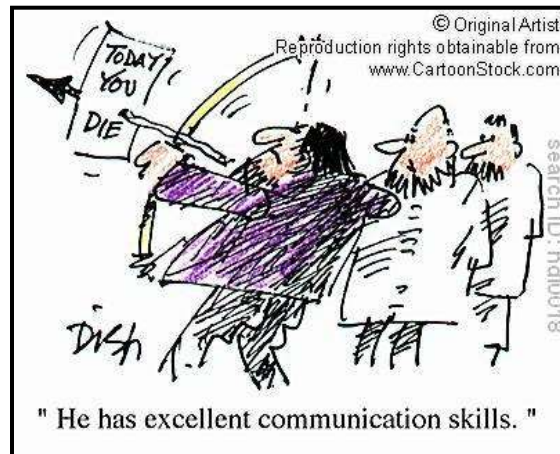
*Distinction
Among Terms*

All Communication



14

Health Communication



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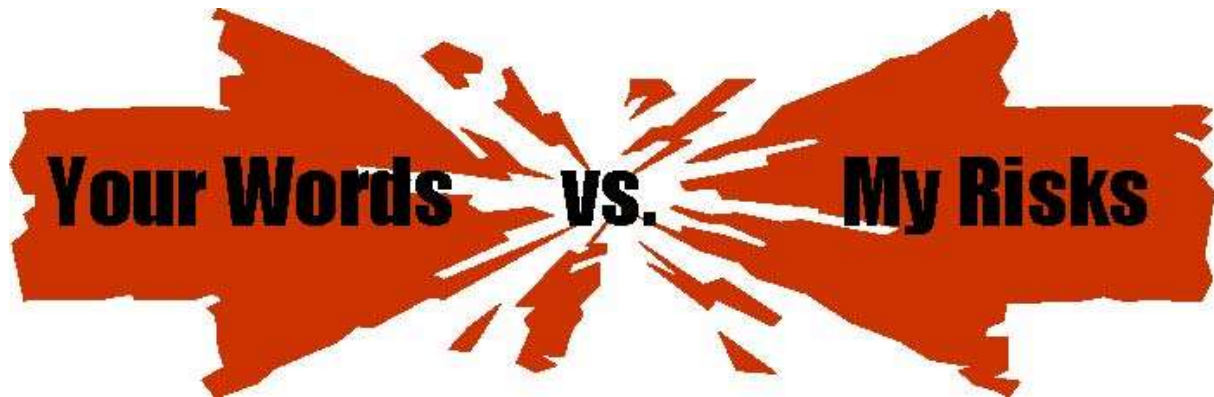
Risk Communication



16

16

What is Risk Communication?



17

Crisis Communication



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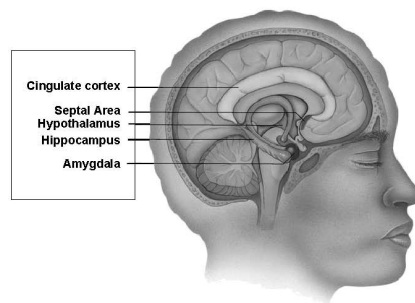


Factors that Affect Processing Information in a Crisis

19

We are emotional people...

The Limbic System regulates our emotional responses



20

People who are upset ...



... tend to think negatively!

21

Mental Noise...

*This mental noise
reduces the ability
to process and
retain information
by 60%*



22

Perceptions of Risk

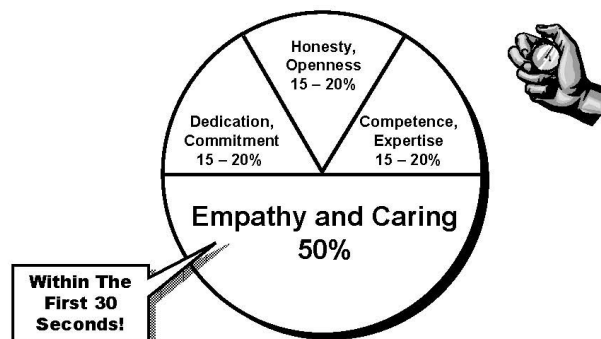
People who are upset have perceptions of risk ...



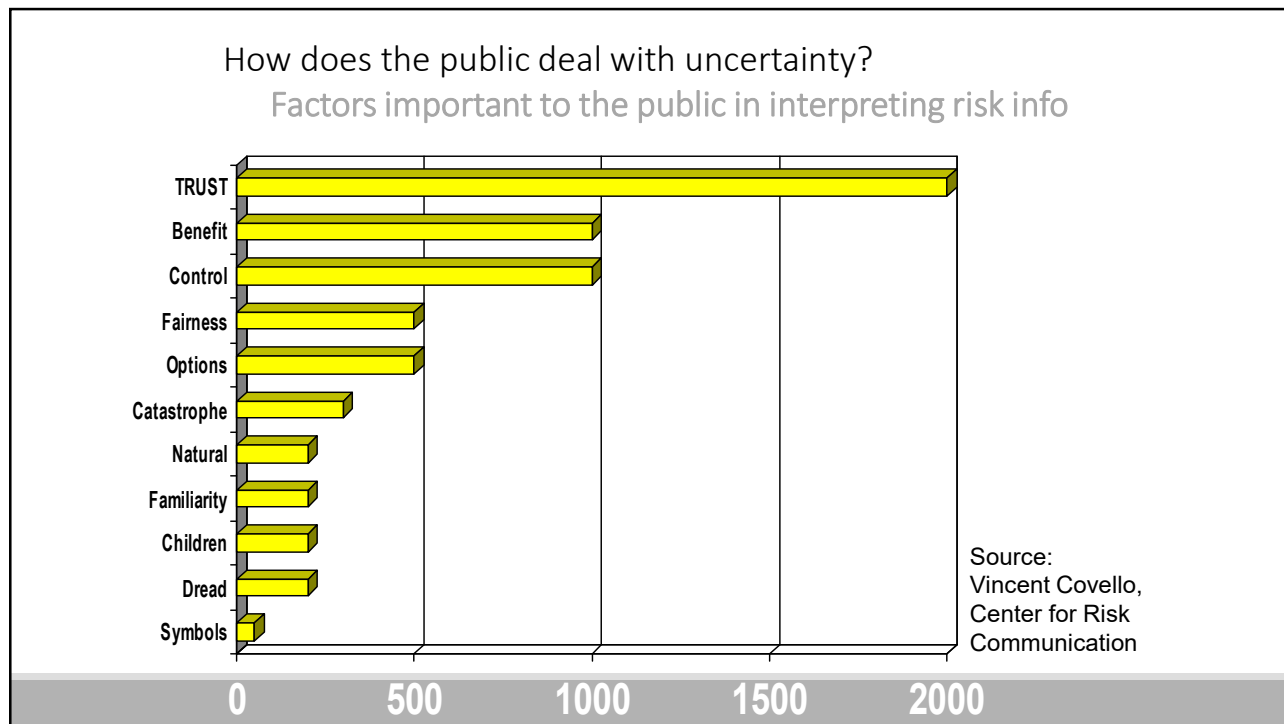
that are often very different than those of technical experts.

23

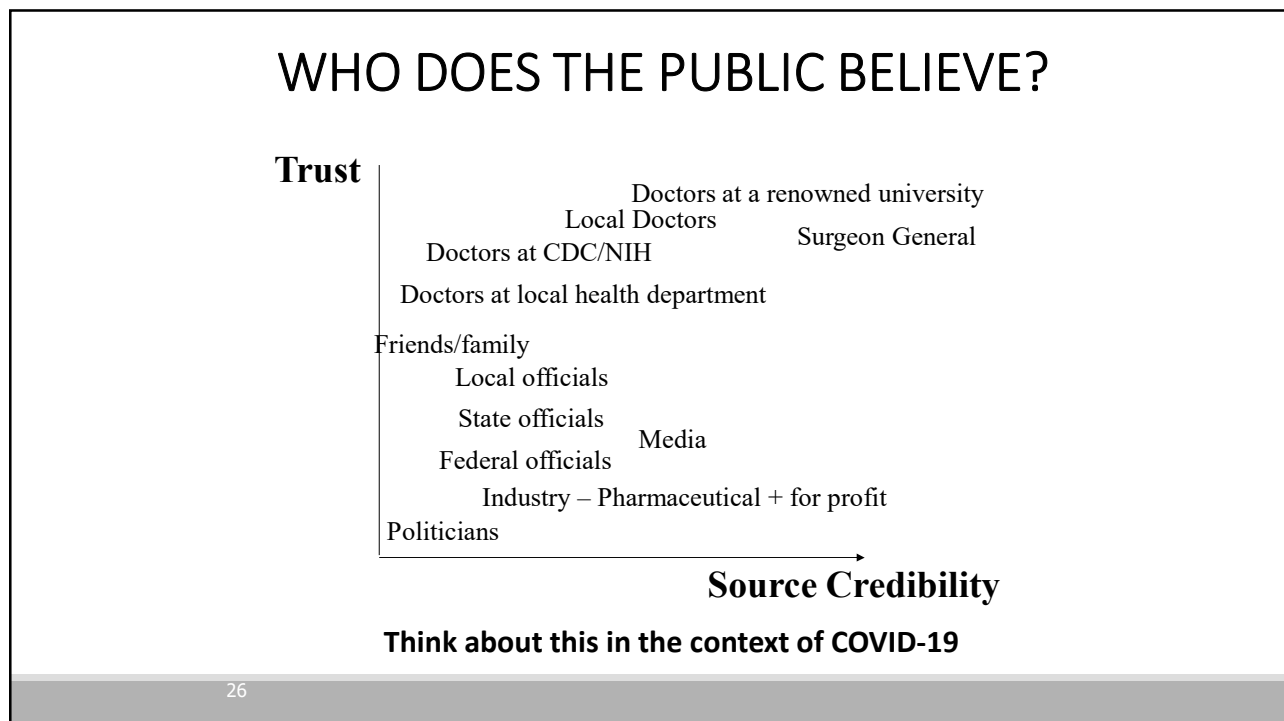
What will people trust?



24

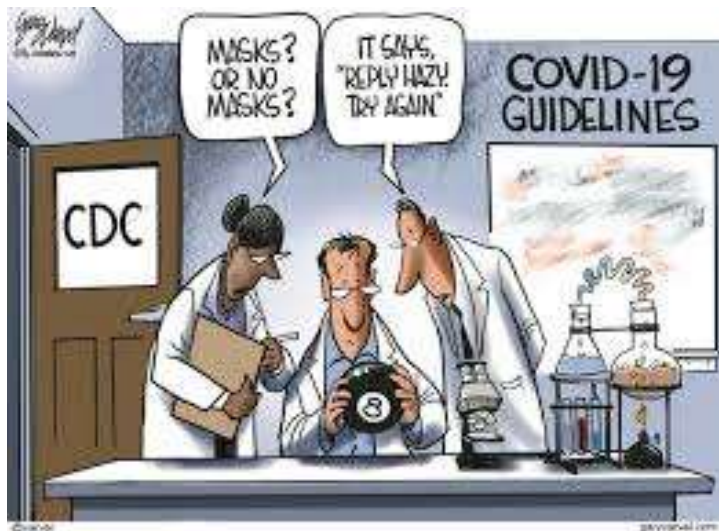


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26



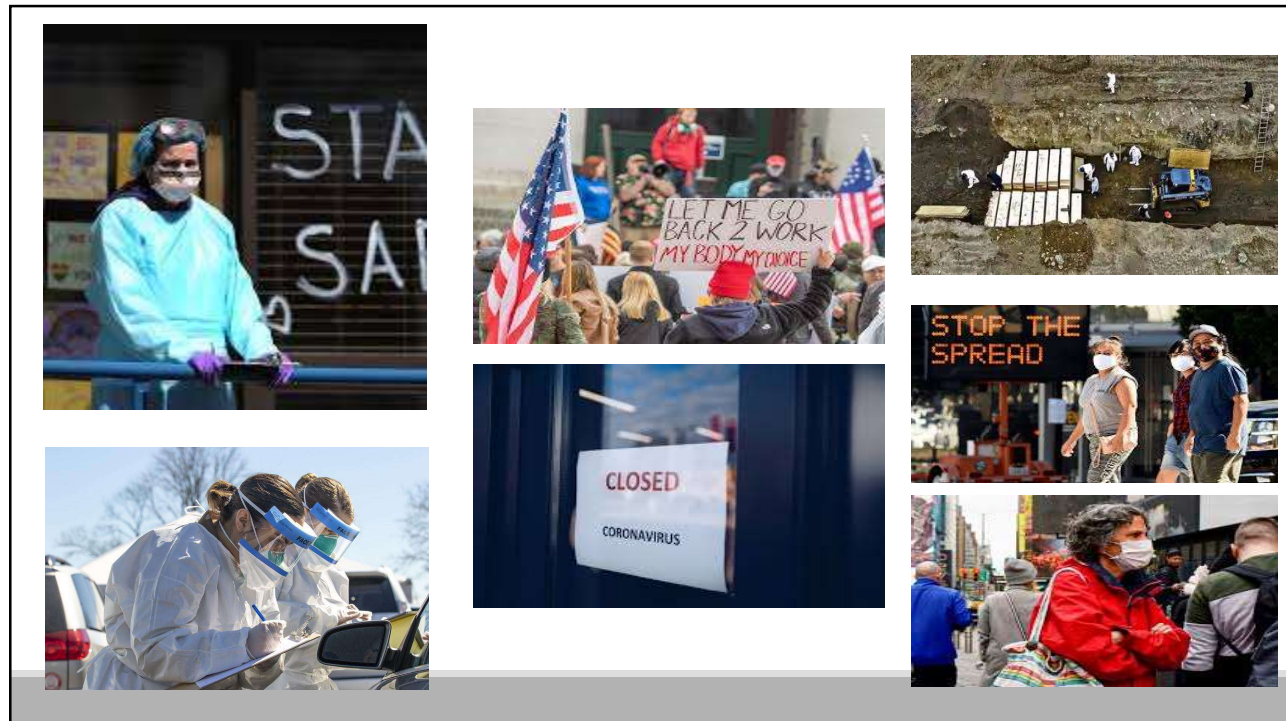
What happens in the absence of that authority?

27



COVID-19 Perceptions and Behaviors

28



29

COVID-19
CORONAVIRUS DISEASE

Health Alert:
Coronavirus Disease 2019 (COVID-19)

You have traveled to a country with an outbreak of COVID-19 and are at higher risk.
COVID-19 is a respiratory illness that can spread from person to person.

Stay Home
Stay home for the next 14 days and monitor your health. Take your temperature with a thermometer two times a day and watch for symptoms.

If you feel sick and have symptoms:

- Call ahead before you go to a doctor's office or emergency room.
- Tell the doctor about your recent travel and your symptoms.
- Avoid contact with others.
- Do not travel while sick.

Symptoms
Illnesses have ranged from mild symptoms to severe illness and death. Symptoms may appear 2-14 days after exposure.

Symptoms can include:

- Fever (100.4°F/38°C or higher)
- Cough
- Shortness of breath

Visit the website for more information on monitoring your health and how to contact local public health officials. Visit: www.cdc.gov/COVID19

DO YOUR PART: COVID-19
MULTCO.US/COVID19

TEMPORARILY CLOSED -

- Playgrounds
- Skateparks
- Sports courts and fields

Maintain a distance of 6 feet

Messaging...

30

Media Coverage



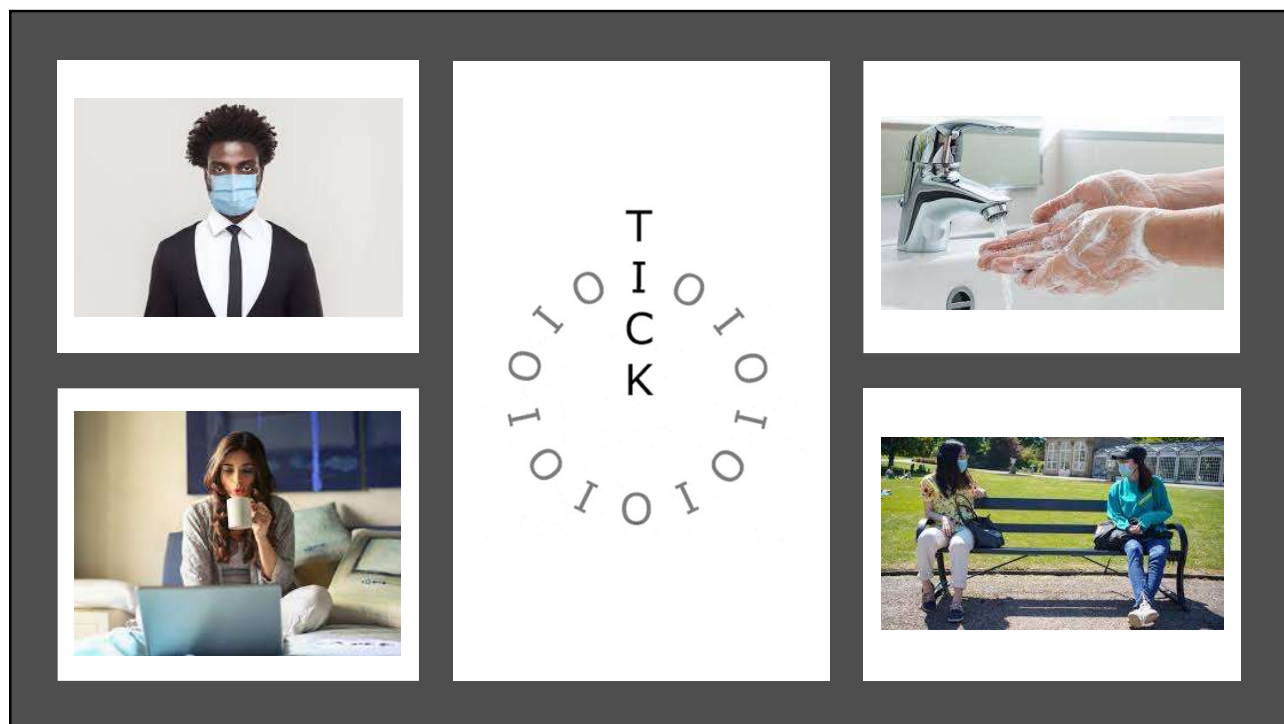
31

Mixed messages (just to name a few)

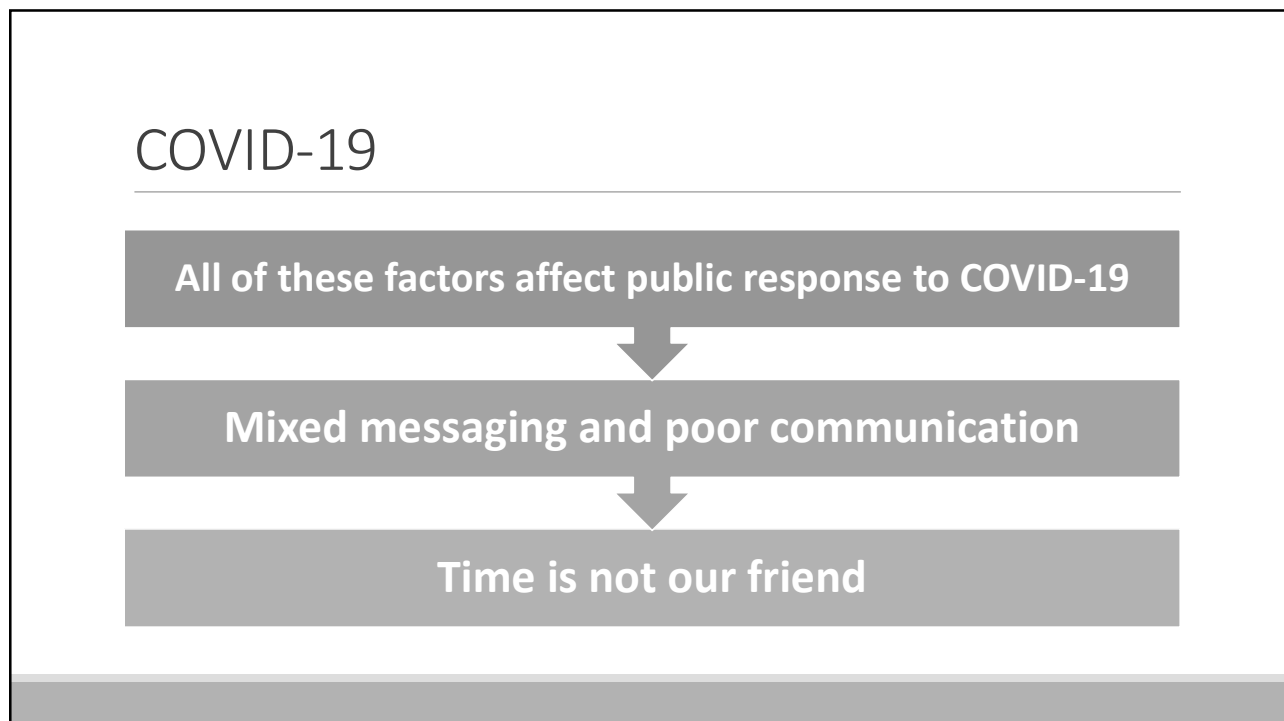
- Extent and spread
- Flu analogy
- Testing
- Who is at risk
- Masks
- Stay at home orders
- Vaccines will give you COVID



32



33



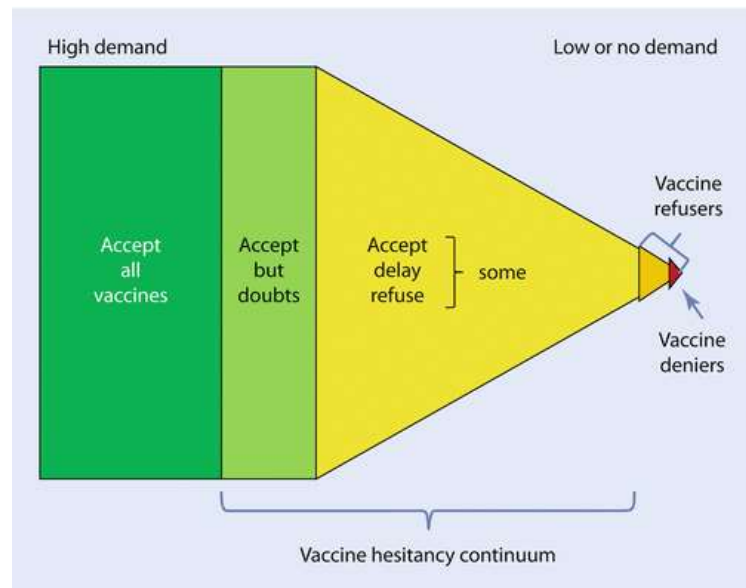
34



Vaccine Hesitancy

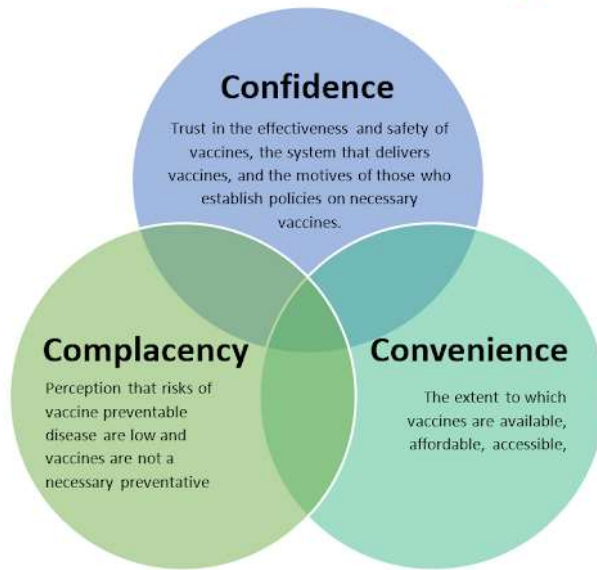
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Vaccine Hesitancy –
What is it
and what do
we know?



36

Vaccine Hesitancy



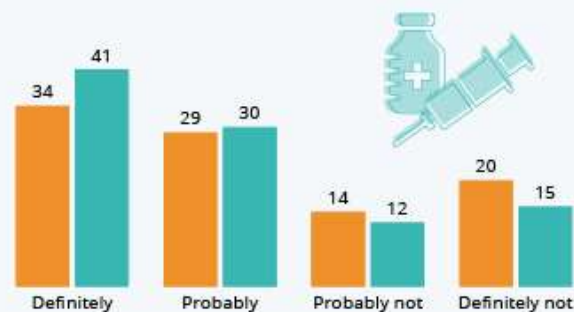
Differences
between general
vaccine hesitancy
and COVID-19
vaccine hesitancy

37

Vaccine Hesitancy Falls

Percentage of U.S. adults who would/would not get a COVID-19 vaccine if it was free and deemed safe by scientists

September December



Surveys conducted Aug. 20-Sept. 14 and Nov. 30-Dec. 8 of 1,769 and 1,676 U.S. adults, respectively
Source: Kaiser Family Foundation

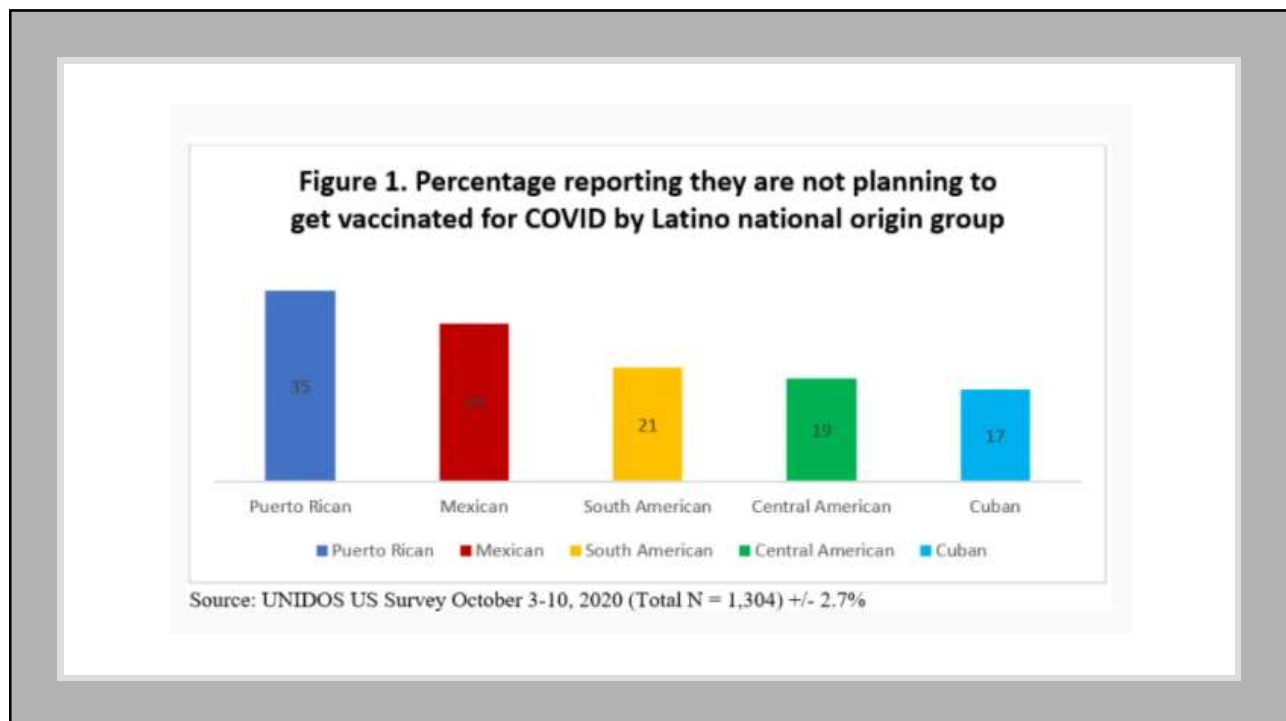


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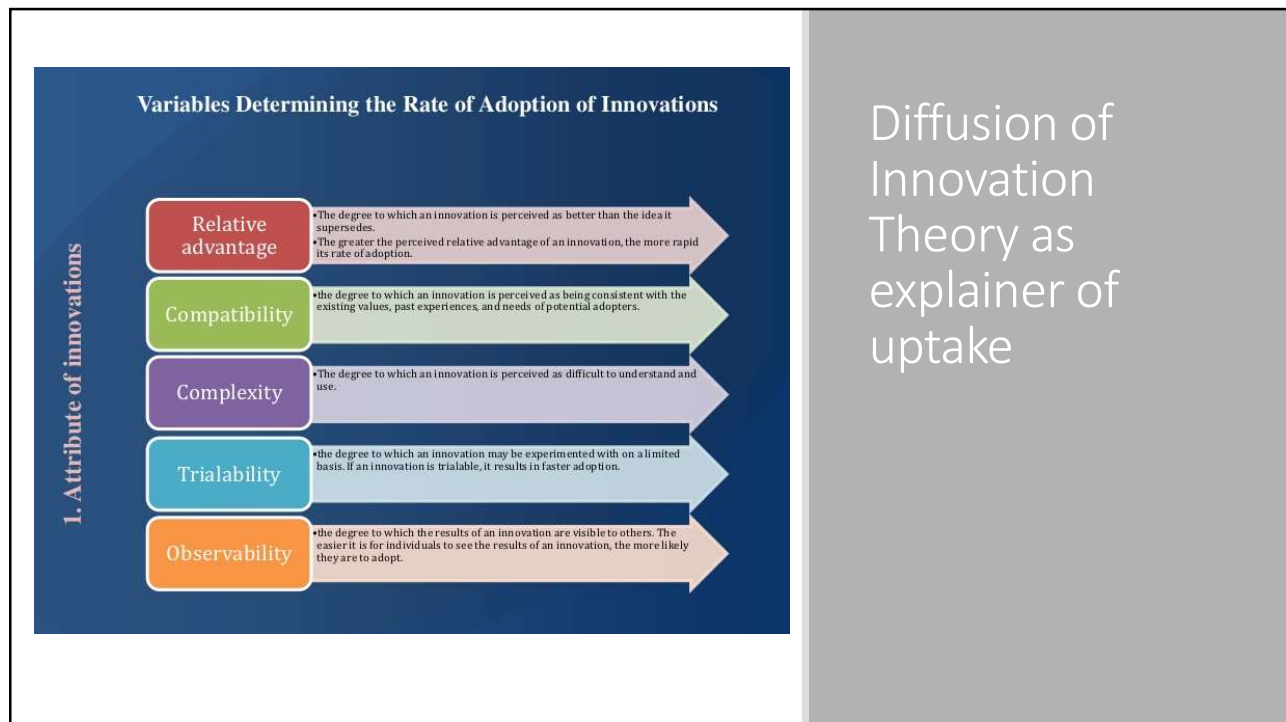
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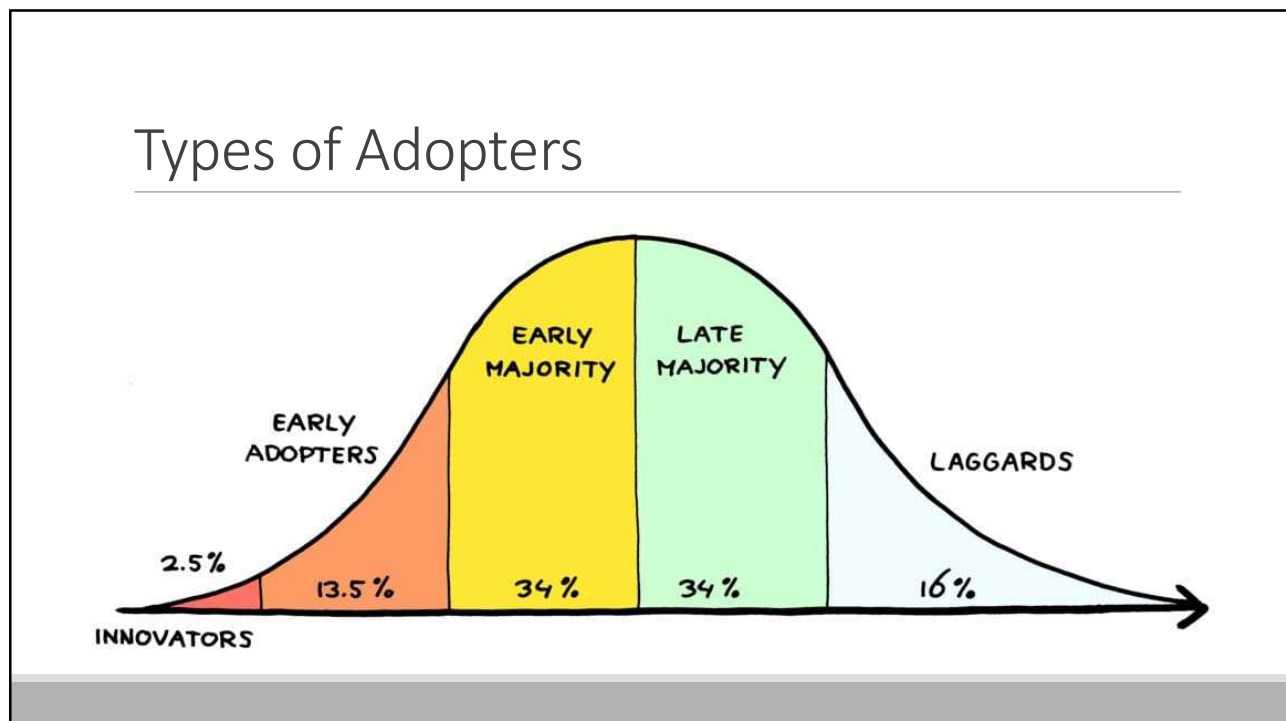
39



40



41



42

WHAT STAKEHOLDERS CAN DO TO ENCOURAGE VACCINATION

Combining and scaling up these best practices can help ensure that current and future generations of children and adults will continue to see the benefits of vaccines.



Health care networks and educators can work to ensure providers have the training and support they need to make strong vaccine recommendations and adequately address the concerns of hesitant parents.



Providers can make use of available tools and training to understand major vaccine concerns, and prepare themselves for tough conversations.



Health plans and insurers can support provider efforts by adequately reimbursing for the entire cost of vaccination, including purchasing, storage, counseling and administration.



Federal legislators can work to encourage vaccination by allowing payers to use premium differentials within the parameters of the federal law that incentivize use of the recommended vaccine schedule.



States can enforce existing vaccine mandates, make it more difficult to obtain vaccine exemptions and allow vaccines to be given in more convenient locations such as pharmacies.



State and local health departments can help to address each cause of vaccine hesitancy through targeted public awareness and education campaigns.

CH Children's Hospital of Philadelphia
PolicyLab

Risk communication strategies to combat vaccine hesitancy

43

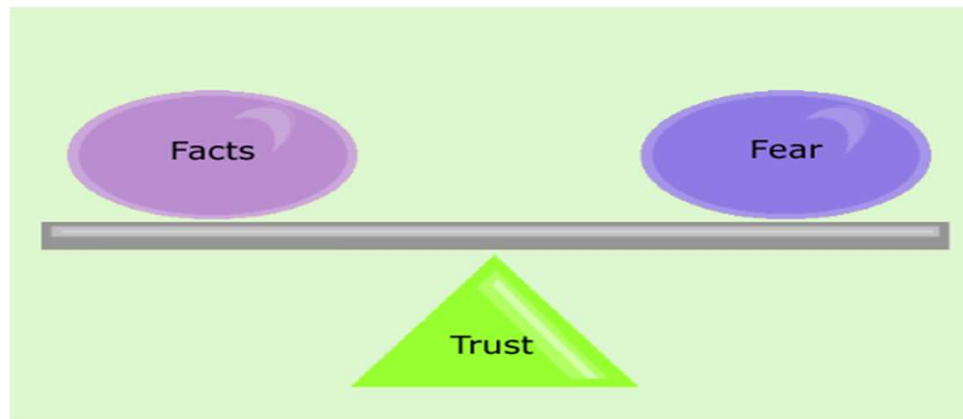


Experts vs. Lay People

Check out Tim Caulfield's work:
[@CaulfieldTim](https://twitter.com/CaulfieldTim)
<http://twitter.com/#!/caulfieldtim>

44

Fear as a Powerful Motivator



45

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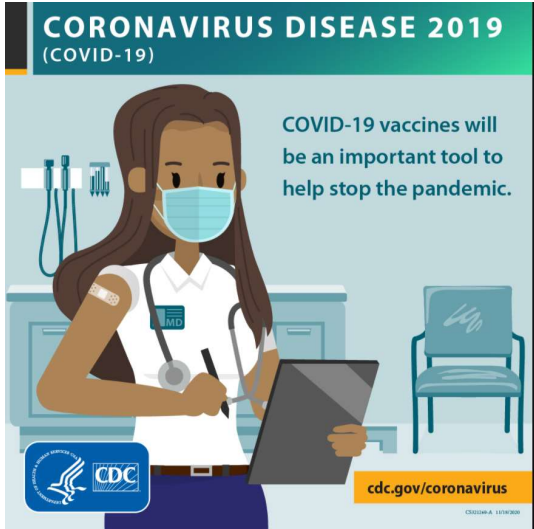
Take Away...



Check out guidance from the Public Health Institute:

<https://www.phi.org/thought-leadership/communicating-about-the-covid-19-vaccines-guidance-and-sample-messages-for-public-health-practitioners/>

46




CORONAVIRUS DISEASE 2019
(COVID-19)

COVID-19 vaccines will be an important tool to help stop the pandemic.

CDC

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

CDC Toolkit (only aimed at healthcare workers right now): <https://www.cdc.gov/vaccines/covid-19/health-systems-communication-toolkit.html>



COVID-19 Vaccination* Communication:

Applying Behavioral and Social Science to Address Vaccine Hesitancy and Foster Vaccine Confidence**

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¹ National Cancer Institute, National Institutes of Health (NIH)
² Office of Behavioral and Social Science Research, Division of Program Coordination, Planning, and Strategic Initiatives, NIH
³ Although technically these are SARS-CoV-2 vaccines, we refer to them as COVID-19 vaccines to be consistent with how most lay people describe them.
** The content of this paper is based on what was known as of December 2020 regarding COVID-19 vaccines. Recommendations from this report may need to be adapted as new information becomes available.

https://obssr.od.nih.gov/wp-content/uploads/2020/12/COVIDReport_Final.pdf

47

Remember to...

Check out guidance from the Public Health Institute:
<https://www.phi.org/thought-leadership/communicating-about-the-covid-19-vaccines-guidance-and-sample-messages-for-public-health-practitioners/>

Meet	Meet people where they are
↓	
Explain	Clearly explain the vaccine process
↓	
Prepare	Prepare for discomfort and distrust
↓	
Build	Build relationships with trusted messengers in communities
↓	
Name	Name racial equity explicitly

48



Coronavirus

Communication and Relationship to Risk

49

49





50

Thank you!

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Risk Communication Laboratory

<https://sites.temple.edu/turiskcommmlab/>

 **Temple University Risk Communication Lab**
 **@TURiskCommLab**



TURiskCommLab



https://www.youtube.com/channel/UC_nwH1fTsl6Amj8TLjo2JyA

