

How Can Governments Effectively Use Public Communication to Inform and Enable Public Behaviours?

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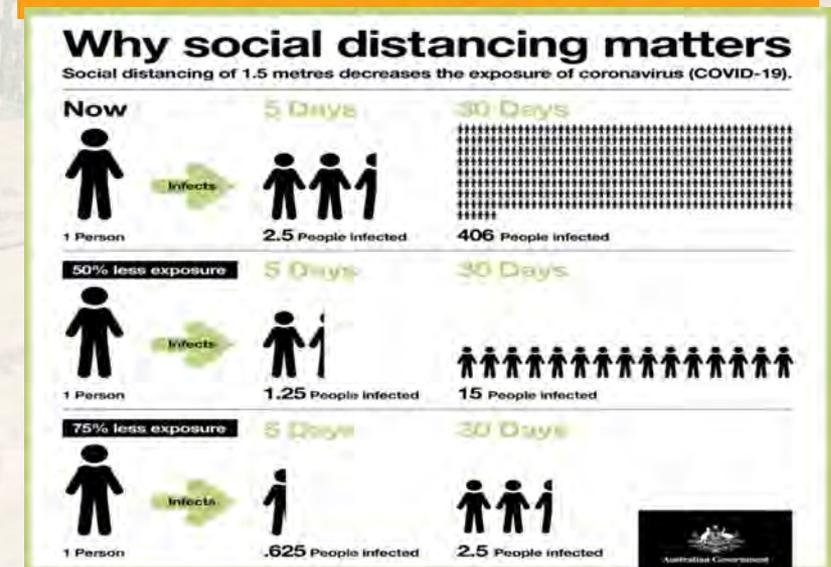
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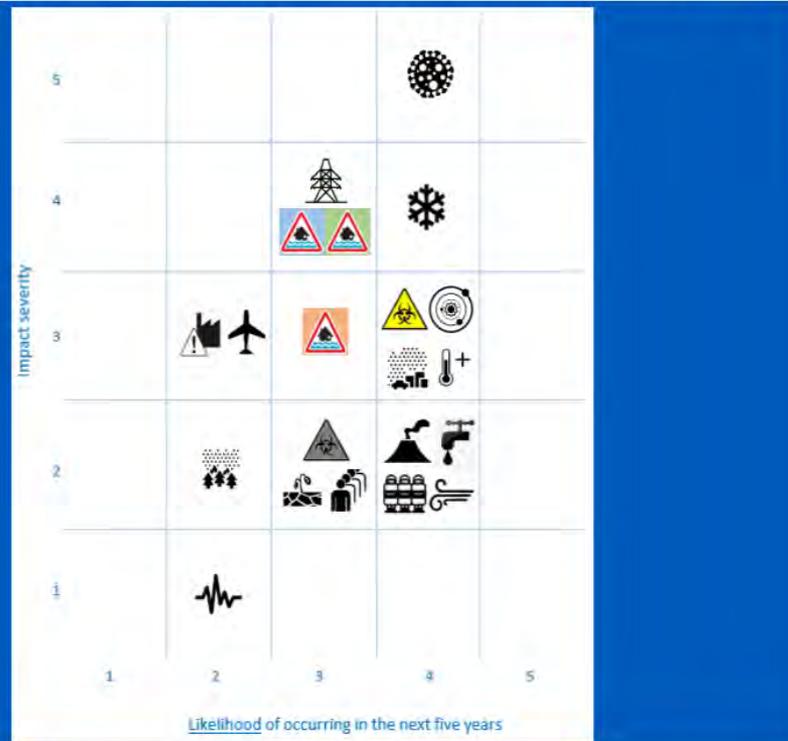
Why is perception of risk important?

- **Fear as a health risk → Risk perceptions inform behaviour.**
 - Implications for physical health, as well as emotional health.
 - Spontaneous behaviours can lead to higher risk (e.g. fly vs drive).
 - Public behaviour can impact the effectiveness of healthcare systems (e.g. Tokyo Sarin Attacks; Goiania, Brazil radiological incident).
 - Communication can inform these perceptions of risk, which inform behaviour.



Expert vs Public Perceptions of Risk

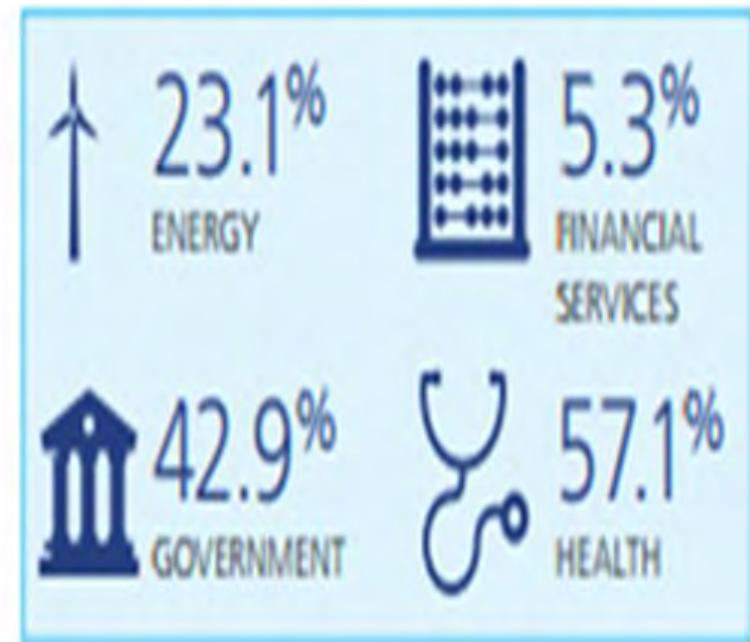
Matrix A - Hazards, diseases, accidents, and societal risks



- KEY**
- Natural hazards**
 - Coastal flooding
 - River flooding
 - Diseases**
 - Pandemic influenza
 - Emerging infectious disease

UK National Risk Register 2017 (pp. 9-10)

Figure 3. Percentage of focus group employees willing to report to work during a deliberate release of the pneumonic plague by sector



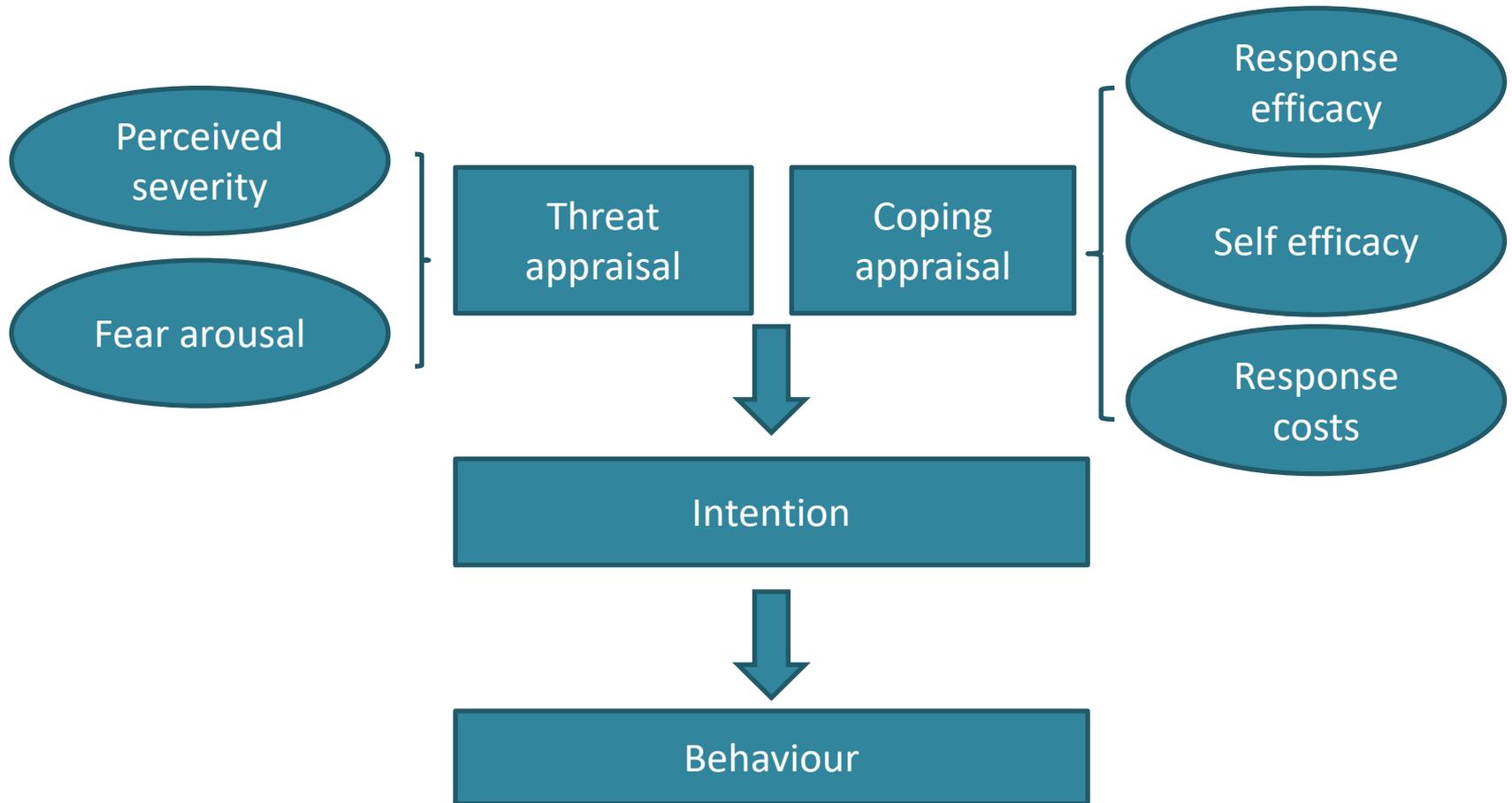
Deloitte 2015 (pp. 5)

Check your Assumptions at the Door:

- Emergency planning assumptions:
 - Often fail to incorporate human behaviour
 - Can be based on contradictory assumptions (e.g. panic followed by compliance).
- Overwhelming evidence that people become interdependent and co-operative and panic is rare.
- Assumptions of panic can lead to a focus on reassurance.
- Understand public response along a spectrum where under response can be as problematic as over response.



Encouraging protective behaviours



COM-B and The Wheel of Behaviour Change (McDonagh et al., 2018, p. 3):

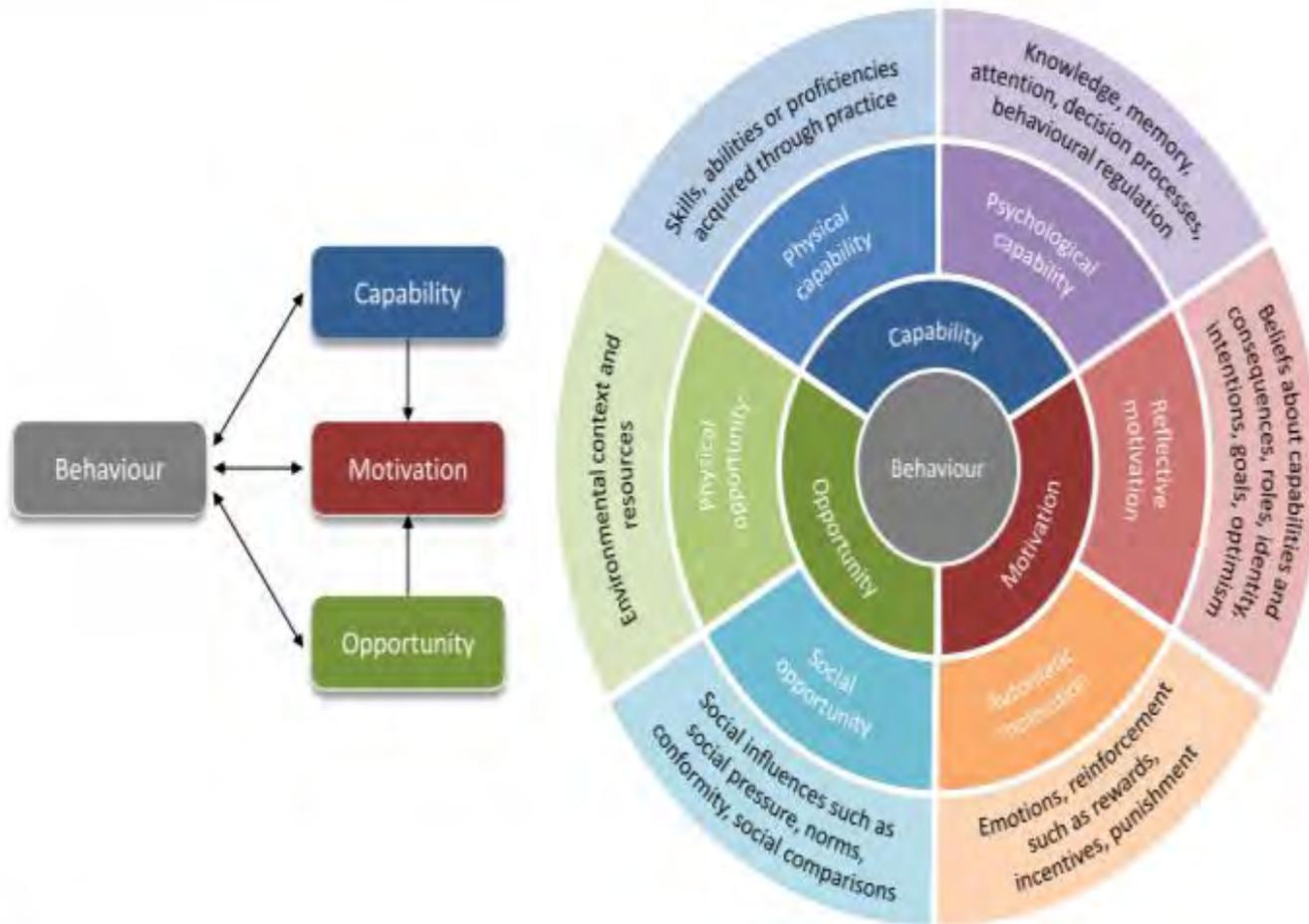


Fig. 1 The COM-B Model [15]

Applying Risk Communication and Behaviour Change Principles to C-19:

- [Communicating Behaviours to Reduce Transmissions Between Social Networks Report to SAGE \(p. 1\).](#)

Communicate two key principles:

1. People whose work involves large numbers of contacts with different people should avoid close, prolonged, indoor contact with anyone as far as possible.
2. People with different workplace networks should avoid meeting or sharing the same spaces.

These steps must be taken in order to communicate the key principles in this report effectively:

- **Carry out an extensive education campaign** for employers, employees, self-employed people and the general public.
- **Co-create guidance and solutions** with input from diverse members of the target user groups (both organisational leads and employees).
- **Redesign shared activities and spaces to minimise contacts.**
- **Use existing organisational structures and processes for implementation.**
- **Monitor and feedback to all concerned** to check and reassure that infection control is being implemented effectively.

Conclusions:

- **Public health communication throughout the lifecycle of events can be targeted to:**
 - Provide reassurance but not at cost of detailed, actionable guidance
 - Provide guidance via multiple modes of communication
 - Be explicit about protective behaviours AND behaviours to avoid
 - Take into consideration perceived response costs associated with following advice (Pearce et al., 2012; Rogers & Pearce , 2013).
- **Behavioural interventions must take into account perceptions about:**
 - The event
 - The efficacy of recommended behaviours
 - The ease of recommended behaviours
 - The cost of recommended behaviours
 - Those who are tasked with communicating the response (e.g. Trust)

The success of government interventions before, during, and after a crisis relies on the cooperation of the public. Evidence-based, co-designed communication enables members of the public to make informed decisions about protective health behaviours.

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Health Protection Research Unit in Emergency Preparedness and Response

National Institute for Health Research

Theme 2: Improving the behavioural impact of communications

This theme focuses on two priorities.

Responding to emergencies involving chemical, biological, radiological and nuclear (CBRN) hazards

Information for members of the public

KINGS COLLEGE LONDON Health Protection Unit [PRACTICE]

Responding to emergencies involving chemical, biological, radiological and nuclear (CBRN) hazards

Information for emergency responders about public responses to CBRN incidents

Resilience and Restoration: Resilience Strategy, Practice, and Science
Volume 11, Number 1, 2019 © Mary Ann Liebert, Inc.
DOI: 10.1089/res.2018.0009

THE IMPACT OF COMMUNICATION MATERIALS ON PUBLIC RESPONSES TO A RADIOLOGICAL DISPERSAL DEVICE (RDD) ATTACK

M. Brooke Rogers, Richard Ambr, and G. James Rubin

In a communication campaign due to the event of a chemical, biological, radiological, or nuclear (CBRN) attack, a well-prepared and informed public is more likely to follow official recommendations regarding the appropriate safety measures to take. We present findings from a UK study investigating the ability of crisis communication to influence perceptions of risk and behavioral intentions to the general public in response to CBRN scenarios. We conducted a focus group study involving a scenario presented to track core knowledge on exposure levels of public knowledge, information needs, and emotional behavioral reactions to an attack involving an oral radiological dispersal device (RDD), or dirty bomb. We used the findings from these focus groups to design messages for the public that could be presented in a short format. We then tested the effects of the brief on reactions to the same scenario with further focus groups. The impact of the new messages on public knowledge, information needs, and emotional compliance with official recommendations was assessed. The provision of information increased the

ORIGINAL RESEARCH Communicating Public Health Advice After a Chemical Spill: Results From National Surveys in the United Kingdom and Poland

Julia M. Pearce, PhD, G. James Rubin, PhD, Richard Ambr, PhD, Simon Westcott, PhD, M. Brooke Rogers, PhD

ABSTRACT
Objective: The aim of this study was to enhance public health preparedness for incidents that involve the large-scale release of a hazardous substance by examining factors likely to influence public responses to official guidance on how to limit their exposure.
Methods: An online demographically representative survey was conducted in the United Kingdom (n=501) and Poland (n=82) to test the strength of association of trust in authorities, anxiety, threat, and coping appraisal with the intention to comply with advice to shelter in place following a hypothetical chemical spill. The impact of ease of compliance and style of message presentation were also examined.
Results: Participants were more likely to comply if at home when the incident happened, but message presentation had little impact. Coping appraisal and trust were key predictors of compliance, but threat appraisals were associated with noncompliance. Anxiety was seen to promote behavioral change. UK participants were more likely to comply than Polish participants.
Conclusions: Successful crisis communication during an emergency should aim to influence perceptions regarding the efficacy of recommended behaviors; the difficulties people may have in following advice, and perceptions about the cost of following recommended behaviors. Generic principles of crisis communication may need adaptation for national contexts.
(Disaster Med Public Health Preparedness 2012;5:100-110) (doi:10.1007/s12688-012-0150-1)

Key Words: communications, disasters, behavior, trust

The health effects of incidents that involve the large-scale release of a hazardous substance can be reduced if people follow official guidance on how to limit their exposure. Unfortunately, compliance with official guidance is often poor.¹ Although it is not fully understood why members of the public do not comply with official advice during major public health incidents, a number of factors are likely to influence their behavior. These include the perceived risk of the incident, the perceived severity of the incident, the perceived efficacy of the recommended behaviors, the perceived cost of following recommended behaviors, and the perceived trust in authorities.²⁻⁴

DISPATCHES Perceptions and Reactions with Regard to Pneumonic Plague

G. James Rubin, Richard Ambr, M. Brooke Rogers, Ian Hall, Steve Leach, John Simpson, and Simon Westcott

We assessed perceptions and likely reactions of 1,000 UK adults to a hypothetical terrorist attack involving pneumonic plague. Likely compliance with official recommendations ranged from good (55%) to low (20%) depending on the type of message. We informed participants that it was now several days later, that the source of the outbreak had been determined to be a container deliberately hidden at a train station, and that >100 persons had received a diagnosis of plague. In stage 4, we told participants about a specific public health strategy that was being introduced. We informed 600 randomly selected participants about the setting up of mass treatment centers for persons who had been at the train station and told the other 500 that persons who had been at the train station were being asked to stay home for 7 days and to please a help line if symptoms developed.

In the bacterium that causes plague, is a bacterium agent (2). The presentation is of particular concern because it can be person to person and is fatal if untreated interventions such as isolating case-patients, and providing prophylactic antimicrobials the spread of an outbreak (3,4). The interventions on public preparation, can be taken for granted (5). Indeed, various are suggested for future plague outbreak investigations (6), mass public fear and (7), and setting (8).

At-risk population: A sample of the adult population in Britain to assess their intended behavior in the event of an outbreak of pneumonic plague. We assessed their perceptions of pneumonic plague and whether perceptions were associated with

September 14-24, 2007, a UK mail-in survey. The 1,000 UK residents, a random-digit-dial sample of the British population, were selected by using proportional quotas that the overall sample represent a representative of the British public (7).

STUDIES IN CONFLICT & TERRORISM
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Challenges for Effective Counterterrorism Communication: Practitioner Insights and Policy Implications for Preventing Radicalization, Disrupting Attack Planning, and Mitigating Terrorist Attacks

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ABSTRACT
Growing concerns about small-scale, low sophistication terrorist attacks, and the difficulties they present for security services, make public coproduction of security increasingly necessary. Communication to ensure that the public is aware of the role they can play will be central to this. This article, based on interviews with thirty expert practitioners, explores challenges associated with communication designed to prevent radicalization, interdict attack planning and mitigate the impacts of a terrorist attack in the United Kingdom and Denmark. The interplay between these challenges and the contemporary terrorist context are analyzed, highlighting that new, or adapted, communications and approaches may be necessary.

While remaining vigilant to 9/11 and 7/7 style large-scale attacks, security services across Europe are increasingly contending with smaller scale, less sophisticated acts of terrorism. Attacks by lone actors or small, self-organized cells in Belgium, the United Kingdom, Denmark, Germany, and France testify to the growing relevance of this threat. Indeed, officials in countries including the United Kingdom and Germany have described future attacks of this nature as almost inevitable.¹ The unique features and challenges of the changing threat landscape,² and the active promotion of this attack style by terrorist groups such as Daesh and Al Qaeda,³ present significant policy challenges. In particular, they make public coproduction of security increasingly necessary, by which we mean the active engagement of private citizens and key non-security stakeholders (e.g., teachers) in aiding authorities in detecting, assessing, and reporting signs of violent extremism. Communication, already recognized as a central element of counterterrorism strategies, is particularly important in this context, if the public(s) are to recognize the role they can play and be prepared (and able) to do so.⁴

Coproduction has informed a range of policy areas, from Neighborhood Watch to public service design, across different national and cultural contexts.⁵ Safety and security are not