COMMunicating during a crisis is different: 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. As a leader, you need to know that the way you normally communicate with your community may not be effective during and after it suffers a crisis.

FIVE COMMUNICATIONS FAILURES

Mixed messages from multiple experts. In a crisis, people don’t want to “just pick one” of many messages, they want the best one or the right one to follow.

Information released late. If the public expects an answer from your organization on something that is answerable and you won’t provide it or direct them to someone who can, they will be open to being taken advantage of by unscrupulous or fraudulent opportunists.

Paternalistic attitudes. help the public to reach the same conclusion you did by sharing with them what you learned to reach that conclusion.

Not countering rumors and myths in real time. For example, what if a rumor starts that there isn’t enough drugs for everyone? What is your system to monitor what is being said by the public and the media? What is your system to react to false information?

Public power struggles and confusion. Sometimes there may be a power struggle over jurisdictions or other issues. The important thing is to make sure these are worked out quickly and confidentially. It’s naturally disconcerting to the public to think that the people responsible for helping them are not getting along.

SUCCESSFUL COMMUNICATION

• Be the first source for information
• Express empathy early
• Show competence and expertise
• Remain honest and open
• Commit and remain dedicated

There are a number of psychological barriers that could interfere with the cooperation and response from the public. Many of them can be mitigated through the work of a leader with an empathetic and honest communication style. Give people things to do. As much as possible, give them relevant things to do; things that are constructive and relate to the crisis they’re facing. Anxiety is reduced by action and can restore a sense of control. The actions may be symbolic (e.g., put up the flag), or preparatory (e.g., donate blood or create a family check-in plan).

BUILD AND MAINTAIN PUBLIC TRUST IN A CRISIS

Empathy and caring. Empathy and caring should be expressed within the first 30 seconds. Acknowledge fear, pain, suffering, and uncertainty.

Competence and expertise. Education, position title, or organizational roles and missions are quick ways to indicate expertise. Another useful means is to have established a relationship with your audiences in advance of the emergency. If that is not possible, have a third party, who has the confidence of the audience, express his or her confidence in you or your organization.

Honesty and openness. This 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. State 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.

Accountability. Be as transparent as possible. 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 resources are being distributed.

WHAT ABOUT PANIC?

Contrary to common belief, people seldom act completely irrationally or panic during a crisis. The overwhelming majority of people do not engage in extreme behavior.

I think the most important thing to learn from this or any other tragedy is that unlike the frustration we feel sometimes on an airplane when something goes crack or the plane doesn’t leave and there’s total silence from the cockpit, that’s the worst thing to do. The best thing is transparency and openness.

— Frank Keating, Governor Oklahoma City, Bombing, 1995
GRIEF AND YOUR ROLE AS SPOKESPERSON

Your presence is more important than your conversation. Family members may voice feelings with such strong emotion as “I don’t know how I’m going to live without my husband,” or “Why would God allow this to happen?” Short statements of condolence, such as “I’m so sorry,” “This is a sad time,” or “You’re in my prayers,” are enough of a response. If a person tenses at your touch, withdraw. 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. Religious customs for bereavement vary. While most of the U.S. population professes to be of a Christian faith, remember that other religions are also prominent in the United States.

“Empathy is the door that opens your voice to the information that you want to communicate. So if people can perceive that you actually care about them in a genuine, human way, I think they’re much more willing to listen to anything else that you have to say. If you don’t do that, you have really lost your audience because people won’t listen to you.”

— Julie Gerberding, M.D., Director, CDC
SARS, 2003

HANDLING DIFFICULT BEHAVIORS

Dependence on special relationships
Some people will attempt to bypass official channels to get special treatment or access to what they want during a crisis. Good communication can reduce some of these reactions. The more honest and open response officials are about what is available and for whom, the better odds officials have of reducing the urge among individuals in the community to seek out their own options.

Vicarious rehearsal
Sometimes individuals not directly affected by an event may mentally rehearse the crisis and “try on” the courses of action presented to them. Such persons can heavily tax recovery and response efforts. Consider creating alternate messages encouraging them to delay taking the same action until it is warranted by circumstances. Provide alternative things for them to do.

MUPS: Multiple Unexplained Physical Symptoms
Commonly called the “worried well”, the fact is that stress caused by a crisis situation will make some people physically ill. Overburdened medical providers may have a difficult time trying to figure out who is really sick and who is sick from the stress of the situation. Communicate to the community that they need to consider their symptoms are from stress and, if so, provide them steps to help them reduce the stress such as deep-breathing exercises, physical exercise and talk therapy with friends and relatives.

Stigmatization
Fear and isolation of a group perceived to be contaminated or risky to associate with will hamper community recovery and affect evacuation and relocation efforts. This could have both economic and psychological impact on the well-being of members of the community and should be challenged immediately.

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