

CHAPTER 13, SECTION 5 RISK COMMUNICATION AND MOLD

1. **INTRODUCTION.** Risk Communication is an interactive process or exchange of information and opinions among interested parties, or stakeholders, concerning a risk, potential risk, or perceived risk to human health, safety, or the environment.
 - a. Exposure to mold in the workplace and in military housing units has become a risk communication challenge for many Navy and Marine Corps industrial hygienists (IHs), safety specialists, and health care providers. Years ago, most people thought of mold mainly in terms of mildew in the shower or fuzzy green spots on stale bread. There was virtually no perception among the public of health risks from exposure to mold. In recent years, there has been substantial media coverage on the health risks of exposure to indoor mold. The media is more and more reporting on the threats of what they are calling “toxic mold”. This coverage, coupled with real or perceived increases in asthma rates and sensitivity to allergens, has caused a shift in many people’s perception of the health risks from exposure to mold. What was once seen as just a nuisance by most people is now considered a serious health threat by many. Because of this perception of risk, it is very important for Navy sites located in areas prone to mold to develop risk communication plans to prevent a communication crisis or communicate effectively if a crisis does occur.
 - b. A proactive risk communication program is designed to share information early with people to prevent situations in which high concern and low trust can lead to conflict and to help resolve conflict if it does occur by enabling people to make their own informed decisions about health risks. Developing a risk communication program requires knowledge of risk communication principles and techniques.
 - c. The information in this section was selected to provide an overview of risk communication principles and guidelines to follow and techniques to use in an effective Mold Risk Communication Plan. It is intended as a desk reference or guidance document for IHs who are responsible for indoor air quality issues such as mold. Personnel responsible for these issues are encouraged to attend formal risk communication training prior to developing or executing their plans.
2. **GOALS AND OBJECTIVES.**
 - a. The first step in developing a risk communication plan is identifying the goals and objectives. Communication goals typically fall into two categories for mold issues. They are proactive and reactive. A comprehensive Mold Risk Communication Plan will include goals and actions from both of these categories. Three typical mold communication goals for Navy activities are:
 - (1) Educating Navy personnel and housing residents about mold and the potential health effects.
 - (2) Engaging workers and residents in efforts to prevent mold growth.
 - (3) Providing timely and appropriate information in the event of a mold “communication crisis” during which workers or residents are experiencing health effects or are concerned over potential health effects from exposure to mold.

3. UNDERSTANDING YOUR STAKEHOLDERS AND THEIR NEEDS.

- a. Once your site specific goals are identified, you must identify your audience before you can develop any specific actions or strategies. There will likely be different groups of people that you need to communicate with in different ways concerning mold issues. You need to identify all of the people who are likely to be interested in, concerned about, or affected by the potential risk or risk management decisions. These people are referred to as the *stakeholder groups*.
- b. Your list of stakeholders will vary by issue and location, but for most mold issues will include groups of people such as: housing residents, building workers, building supervisors, maintenance or cleanup workers, housing managers, department heads, Commanding Officer's staff, legal staff, local Unions, safety staff, Navy health care providers, and the news media (Navy and civilian sources).
- c. It is important to identify and research each stakeholder group to learn about their different information needs, including their perceptions of the health risks posed by mold. With health and safety risks, people often have a different perception of the magnitude of the risk than the actual risk number implies. There are four primary risk perception factors that effect how dangerous a person considers a health risk to be. They are **trust, benefit, familiarity, and control**. Understanding these risk perception factors and the way these factors effect how people rank health risks is one of the building blocks of a good risk communication plan.
- d. **Do your stakeholders trust the risk managers?** - When a person trusts the people in charge of managing or controlling the risk **and** those providing information about the risk, then they are less likely to overestimate the dangers of the risk. Conversely, a person's fear or level of concern over the risk will likely go up if they do not trust that the risk manager and/or information source is openly sharing information **or** is not capable of safely handling the situation.
- e. **Are there any benefits to accepting the risk?** - If there is a benefit to the person from the action or situation, then they are more likely to consider a risk "acceptable." Without obvious benefits, people are more likely to become concerned about a risk that scientists and health care professionals may consider miniscule or "safe."
- f. **Is the risk a familiar one?** - When people are familiar with a risk or understand why the risk exists and how it is being managed, then they are less likely to become concerned unnecessarily.
- g. **Do the stakeholders have any control over the risk management process?** -Involving people early and often in the risk management process by openly sharing information is the best way to make people feel engaged and part of the process. When people feel engaged in the risk management process, their perceptions of the magnitude of the health risk is more likely to be in line with what the science and numbers are telling them. Whenever and as often as possible, give the stakeholders something concrete to do to help alleviate the risks, such as "how-to" information for safely disinfecting their own shower stall or procedures to report water leaks.
- h. It is very important for you to understand your different stakeholders' perception of the health or safety risks concerning mold and your particular situation before you develop any communication strategies. Perception is reality for most people, so perceptions are

typically not easy to change. If you are trying to convince people to change their perception, then you will need to examine each of the four risk perception factors and identify ways that you might be able to affect your stakeholders' level of trust, feeling of benefit, familiarity with the situation, and feeling of control.

4. **DEVELOPING COMMUNICATION STRATEGIES.**

a. Different communication strategies need to be developed for each stakeholder group that are designed to provide both the information the Navy feels is important and the information that each particular group wants or needs to address their questions and concerns. These strategies are typically organized around the three M's of risk communication: **Message** (what to say), **Media** (how it should be said), and **Messenger** (who should say it).

b. **Message Development**

(1) The underlying objective of any communication process is to exchange information, or to convey a message. With health risk issues such as mold exposure, people typically are not primarily interested in all of the numbers and details of your investigation and cleanup. They are most often interested in finding out if they are safe and about what your organization has done to identify and reduce the health risks. More than a technical discussion of how small or large the problem is, people want to know what happened, what has been done or is being done to reduce and manage the mold problem, and what plans are in place to prevent a similar problem in the future.

(2) A clear, concise, and easily understood message is paramount when explaining health and safety risks. The content of your messages becomes even more critical during times of high concern as might occur if there is a mold problem in a school, office building, or apartment complex. Research indicates that when people are angry or upset they have difficulty hearing and processing information. As much as 80% of the message may be ignored completely, forgotten, or misinterpreted. The content and organization of your message becomes crucial in these situations. There are a few general rules about message development to help maximize the amount of information your audience hears, understands, and remembers:

(a) Limit your information to 3 key messages that convey empathy/caring, honesty/openness, and dedication/commitment.

(b) Keep messages short and simple (8th grade reading level or lower if possible), and avoid messages that convey only technical facts and information.

(c) Focus on action, both that has been taken and is planned for the future.

(3) Your key messages should each be backed up by technical facts and information. These facts should include reference to credible third party information sources that support your messages whenever possible. Some examples of credible third parties might be the American Industrial Hygiene Association (AIHA), the Centers for Disease Control and Prevention (CDC), or the local health department. This arrangement of key messages supported by fact is often referred to as "layering your information." With most health risk issues, there will be stakeholders who are satisfied with the key messages, and then there will be others with varying interests or

concerns that will want more detail and facts to satisfy their questions. By organizing your information in layers, you can provide your stakeholders with the amount of information that they want and need to address their personal concerns.

- (4) There are several traps and pitfalls that you will want to avoid when developing messages that involve information on real, perceived, or potential health risks. They are especially important to avoid if your mold issue has turned into one of high concern and/or low trust among your stakeholders. They include humor, negative terms, guarantees or absolute phrases (e.g. always, never, definitely), complex language and jargon, personal beliefs, attack (statements about the credibility of opposing groups/opinions), risk comparisons (do not use to justify a health risk only to put numbers into perspective), worst case speculation, and risk numbers or concentration values.

c. Choosing the Best Media

- (1) There are several different information channels that you could use to present information to the public or other interested stakeholders. Some examples include fact sheets, web sites, press releases, site tours, small group meetings, or public meetings. The media that you select should reflect the goal of your strategy and the level of concern or interest among your stakeholders.
- (2) As discussed earlier, there are three primary goals for a typical Mold Risk Communication Plan. The first two goals, to educate people about mold and engage them in mold prevention efforts, can be the basis of a proactive risk communication strategy. There are several ways to proactively share mold information with personnel and residents. The following are just a few ideas:
 - (a) Post a fact sheet on your facility's website.
 - (b) Advertise the importance for mold awareness through articles in your base paper or housing newsletter that highlight information in the fact sheet and sources for more information at your facility.
 - (c) Send an information packet to all housing residents including the fact sheet and a cover letter to grab attention and explain why you are providing the information.
 - (d) Encourage supervisors to discuss mold prevention in routine safety meetings.
 - (e) Post a fact sheet, on bulletin boards in public areas and work spaces, which is personalized with local point of contact for more information.
 - (f) Sponsor a base-wide mold awareness month during which all of the above efforts would be appropriate.
- (3) During times of high concern over potential health effects from mold exposure, more one-on-one communication may be necessary to calm fears or motivate action. Small group meetings may be necessary to talk individually with concerned people and address their needs. If large groups of people are involved, then a public meeting might be needed. Keep in mind that there is more than one format available for public meetings. With health and safety issues such as mold exposure, people typically have different levels of knowledge and different questions and concerns that are best addressed during one-on-one conversations with the experts. This is difficult to accomplish at the traditional "Town Hall" or "All Hands" public meeting format

where there is a formal presentation(s) with people taking turns to ask questions. The best format to encourage one-on-one conversation and meet a variety of information needs is with an open house information session.

- (4) An open house information session is essentially a poster display meeting. The meetings typically include 4 to 6 displays with each display focused on a key message or topic and manned by one or more subject matter experts. For example, with a mold problem you might have the following information displays:
 - (a) A summary of the history of the issue to answer the “what happened” question
 - (b) Highlights of actions taken or planned to correct the problem
 - (c) Plans to prevent future problems and ways that residents or workers can help in the future
 - (d) Educational materials on mold – what it is, how people can be exposed, and potential health effects
- (5) An open house format encourages stakeholders to circulate through various stations where they can gather information, view posters, and talk one on one with subject matter experts. It is difficult to meet the needs of all of your stakeholders with a Town-Hall style meeting that typically involves one presenter and limits the number of people engaged in the question and answer segment due to time constraints and fears of public speaking.

d. **Selecting a Messenger**

- (1) One primary goal of risk communication is to establish trust and credibility. If your mold risk communication strategy involves public speaking, your messenger(s) is vital to achieving this goal. Selecting the spokesperson is just as critical to your communication process as deciding what to say. The person or persons selected to represent your organization must, at a minimum, have experience and feel at ease with public speaking. In addition, he or she needs to understand risk communication principles and the effect that his or her presentation style will have on the public’s perception of risk. Navy and Marine Corps Public Health Center (NMCPHC) recommends that all subject matter experts manning posters at Open House meetings or other personnel representing your command have formal Risk Communication Training before discussing health risks with members of the public.
- (2) The following are a few tips for **trained risk communicators** to keep in mind when preparing to speak with the public on health risk issues:
 - (a) Express empathy and concern early.
 - (b) Be aware of your body language because it can provide 50% to 75% of the final message content.
 - (c) Only answer questions that you are qualified to answer (especially important at Open House Meetings)
 - (d) Exercise caution with promises and commitments, only make promises you know you can keep and plan to keep all the promises you make.

- (e) Anticipate the tough questions and be prepared to answer even the most controversial questions.
- (3) All representatives at public meetings need to be prepared to give consistent messages and answers to questions. There are several models to use in preparing answers to tough questions. NMCPHC recommends the Six Part Model:
 - (a) Express empathy and concern.
 - (b) Provide a positive key message or conclusion that addresses the underlying concern or question, is short, and is framed or “set off.”
 - (c) Provide the first supporting fact or key message that includes endorsement by a credible third party if possible.
 - (d) Provide the second supporting fact or key message.
 - (e) Repeat exact positive key message or conclusion as stated in #2 above.
 - (f) Describe future action and give contact information for further questions.

5. **RISK COMMUNICATION ASSISTANCE.**

- a. There are several communication challenges that are common to most mold issues. NMCPHC can help you deal with these challenges and communicate effectively about issues concerning mold or other potential health risks. Services include:
 - (1) Preparing and/or reviewing risk communication plans.
 - (2) Profiling stakeholders.
 - (3) Developing key messages and lists of anticipated questions and answers.
 - (4) Developing and producing posters, fact sheets, advertisements, and press releases.
 - (5) Planning and coordinating public meetings.
 - (6) Evaluating presentations skills of your messengers.
 - (7) Preparing presenters or poster experts to deal with angry or upset people and to answer tough questions.
- b. To learn more about these services and about training opportunities, visit the NMCPHC Risk Communication web site at <http://www.med.navy.mil/sites/nmcpbc/environmental-programs/Pages/risk-communication.aspx>.