

Crisis Communication Best Practices: Some Quibbles and Additions

Peter M. Sandman

The National Center for Food Protection and Defense's (NCFPD) effort to codify a list of ten best practices in crisis communication is a good starting point for a much needed debate. I had an opportunity to comment on an earlier draft of the paper, and I welcome this second bite of the apple.

Three Kinds of Risk Communication

Let me start with some terminological clarification. I see crisis communication as one of three quite separate risk communication traditions:

1. When people are insufficiently concerned about a serious hazard, the task is to warn them—the domain of what I call “precaution advocacy.” The best practices rightly equate this with the health communication tradition; there is also a parallel safety communication literature. The main problem here is grabbing the attention of an uninterested audience, then using that attention to arouse concern and thus motivate precaution-taking.
2. When people are excessively concerned about a small hazard, the task is to reassure them. I call this “outrage management.” The term “risk communication” arose in this context—in 1980s environmental controversies—but has since expanded to incorporate all three of my categories. Corporate communicators often refer to outrage management as “crisis communication” because high public concern can be a reputational and profitability crisis for the company. The best practices follow them in this, I think mistakenly.
3. When people are appropriately concerned about a serious hazard, the task is to help them bear it and to guide them through it. This is the true paradigm of crisis communication. In a crisis, people are genuinely endangered and rightly upset.

Peter M. Sandman, Ph.D., is a risk communication consultant based in Princeton, NJ. Dr. Jody Lanard contributed to this commentary. Correspondence to: Peter M. Sandman, 59 Ridgeview Road, Princeton, NJ 08540, USA. Email: peter@psandman.com

Of course, reality isn't that simple. In any specific crisis, some people may be insufficiently concerned while others are appropriately concerned; some may even be excessively concerned. The same people may be excessively concerned about some aspects of the crisis, and appropriately or insufficiently concerned about other aspects. In the wake of the 2004 tsunami, for example, many people mistakenly believed that dead bodies or recently caught fish might carry diseases; their worries that aftershocks might produce another tsunami were technically sounder. Thus, a crisis communicator may need to undertake different sorts of risk communication at the same time.

How much concern the situation justifies is itself a debatable decision. The same situation may lead a government agency to do crisis communication (trying to help people cope with their justified concern and the risk that provokes it), a company to do outrage management (trying to diminish people's concern), and an activist group to do precaution advocacy (trying to arouse further concern).

Tolerating and Igniting Fear, Especially Before the Crisis

All this about "concern" points to a central focus in crisis communication, one that I think the best practices neglect: the role of emotion, especially the role of fear. (Other relevant emotions include misery, hurt, guilt, and anger.) How much fear is most conducive to taking appropriate precautions in a crisis? Too much fear can (rarely) escalate into panic or (more commonly) get deflected into denial. But too little fear won't do the trick either. And "concern" is probably too little fear. We are concerned about many things; in a crisis, it would be wise for us to put our concerns aside for the duration, not just add a new concern to the pile. What we need is fear itself. Try rereading the previous section of this commentary and replacing "concern" with "fear" and "concerned" with "fearful." If you have trouble with phrases like "appropriately fearful" and "insufficiently fearful" (while "excessively fearful" strikes you as almost redundant), you may suffer from fear of fear.

If the crisis itself arouses fear—as it often does—the job of the crisis communicator is to help us bear our fear, and to guide the choice of precautionary actions our fear motivates. The best practices rightly include self-efficacy messages (#10); people can bear their fear better when they have actions to take, believe the actions will help, and feel competent to take them. But the best practices would benefit from a more explicit recommendation to tolerate people's fear. The Holy Grail of crisis communicators is to get people to take precautions without frightening them. This is like trying to write a novel without using the letter "e"; it may be possible, but it's certainly a handicap. Official fear of fear is a huge handicap in crisis communication.

The best practices come closest to addressing this issue by urging crisis communicators to partner with the public (#3) and listen to the public's concerns (#4). These two sections focus largely on the wisdom of accepting people's concerns as "legitimate" and "their reality" even if these concerns are not technically sound. I agree, but that's mostly an outrage management issue. The big crisis communication

issue is to help people bear fears that *are* technically sound, and to help them harness these fears in the form of appropriate precautionary action.

I'll go further. In addition to tolerating people's fears, crisis communicators sometimes need to help ignite them. This is especially the case in pre-crisis communication. If the purpose of fear is to motivate precautions, after all, then the fear must come before the precautions are needed. This should be self-evident, yet officials and journalists are often critical of what seems to them premature fearfulness. (*The New York Times* once headlined that "Fear Is Spreading Faster than SARS"—as if it weren't supposed to.) People who have gone through a fearful "adjustment reaction" before a crisis begins are better prepared to cope with the crisis, emotionally as well as logistically.

Pre-crisis communication—arguably a hybrid of precaution advocacy and crisis communication—is missing from the best practices. The best practices rightly advise crisis communicators to do advance planning (#2), but nowhere does the list advise them to do advance communication . . . so the public can do its own advance planning (and help with yours). When I advise clients on their crisis communication plans, one of the things I ask them to do is to imagine that the crisis has just begun and to make a list of things they will then wish the public had already learned or already done. That list is a good start on a pre-crisis communication agenda.

One major reason why officials neglect pre-crisis communication is fear of fear. In the summer and fall of 2005, I participated in months of agonizing debate by U.S. government communicators over how aggressively to warn the public about a possible influenza pandemic. A heartfelt reluctance to frighten people was one of the oft-repeated reasons to avoid emphatic pandemic warnings.

Respecting and Trusting the Public

I think it is impossible to do risk communication without first making a more or less explicit judgment about whether your audience is insufficiently, appropriately, or excessively concerned/fearful. But making the judgment doesn't require expressing contempt for those who disagree. More important still, it doesn't require expressing contempt for the audience itself. Ridiculing people as apathetic or hysterical seldom helps propel them to the desired level of emotional arousal; neither does it motivate them to follow your guidance on recommended precautions.

Failure to respect the public is a consistent problem in crisis communication. You can see it most vividly, perhaps, in officials' attitudes toward precautions. The best practices section on self-efficacy (#10) focuses on offering people things to do. The list mentions, but does not stress sufficiently, offering them choices of things to do, thus drawing on their ability to decide, not just their ability to act. And the best practices don't even mention the possibility that they might come up with their own precautions. When people do come up with their own precautions, official reactions tend to be patronizing or hostile. Some people responded to the anthrax attacks by seeking a prescription for Cipro or spraying their mail with ammonia; some people responded to the SARS outbreaks by wearing masks or avoiding Chinese restaurants.

These intuitive, emotionally useful responses vary in their technical usefulness. What seems to be invariant is the official preference for public obedience over public autonomy. (The same experts who inveigh against wearing masks in public to prevent the spread of infectious diseases urge people to cover their mouths when they cough. They seem not to notice that masks cover the mouth—or that it is hard to cover your mouth without a mask while standing on a bus, one hand clutching your briefcase or pocketbook and the other holding onto the pole or strap.)

Several of the best practices' solid recommendations are defended in ways that I find a little lacking in respect for the public. The best practices' advice to partner with the public (#3), for example, focuses on the need for sources to share what they know. Not mentioned is the possibility that sources need to learn what the public knows. The World Health Organization routinely learns of new health crises by monitoring the rumor mills, long before it gets official confirmation from national governments. When citizens are asked to comment on government emergency response plans (which happens all too seldom), their responses don't just demonstrate that they have "concerns" the planners need to take into consideration; they also point to real, substantive flaws in the plans themselves.

Similarly, the best practices talk several times about "trust" and "credibility," always in the context of how to ensure that the public will trust officials. The best practices recommend, for example, that crisis communicators listen to people's concerns (#4) in order to foster trust and credibility. But trust is two-way. A crisis communication best practice that is missing from the list is to trust the public: to trust that most people are resilient and can bear dire warnings, awful events, and unpleasant truths; to trust that they will want to do the right thing, and that preparing to make good use of volunteers is thus a central part of crisis planning; to trust that their ideas about how best to cope with the crisis are likely to be worth hearing, worth implementing, and worth letting them implement.

Coordinated Messaging Is Vastly Overrated

The only one of the ten recommendations that I actually disagree with is the advice to "collaborate and coordinate with credible sources" (#6). I have no quarrel with collaboration, but I do dispute the wisdom of trying to coordinate a single, credible message. This section seems to envision a coalition of all whose knowledge is sound and whose hearts are pure: getting together well in advance of the crisis, staying together throughout the crisis, and putting out a consistent message that will be clear and credible because it is invariant. This is conventional advice—the term of art is "speak with one voice"—and I can't fault this strategy as a best practice. But I dissent from the customary view that "speak with one voice" is optimal crisis communication. And even if it were optimal, I very much doubt that it is achievable in most crisis situations.

Of course, if there is no significant disagreement among the players about what's happening and how best to handle it, then "speak with one voice" is a no-brainer. But I've never encountered a crisis where that was true. Usually, there is considerable

disagreement, so best practice #5, “Honesty, candor, and openness,” is in direct conflict with #6. So is #9, “Accept uncertainty and ambiguity.”

Also in direct conflict with #6 is my contention that crisis communicators should trust the public. The impulse to speak with one voice is grounded in the conviction that people can’t handle expert disagreement.

In the run-up to the U.S. smallpox vaccination program, the CDC considered the possibility of bringing together all the experts on vaccination side effects in order to wrestle them into a consensus (that is, compromise) estimate of how many “adverse events” were to be expected per million people vaccinated. Ultimately, the decision was made not to do so. Speaking with one voice on this matter would hardly have been candid, since there was considerable dissensus among the experts; it would have aimed at hiding the uncertainty instead of acknowledging it. In addition, the consensus number would inevitably have turned out to be mistaken. And long before it did so, journalists would have been writing stories about how this or that expert was pressured to sign onto a less alarming estimate than the one he or she had previously published. (If no reporter had gone after the story, one of the experts would probably have leaked it. “Speak with one voice” leads to a lot of leaking and a lot of passive-aggressive acting out. People don’t like having to fake consensus.)

Here’s another reason not to try to speak with one voice on matters that are genuinely debatable. Usually, the only way you can make it work is by excluding the dissident voices from your coalition (presumably on the grounds that they are not “credible”). This has many costs, but I’ll mention only the two biggest. First, your crisis management team loses the benefit of those dissident voices; enforced homogeneity leads to worse decision making. Second, the excluded dissidents have a field day in the media; their voices sound *more* credible in contrast to the homogenized message coming from the establishment sources.

By all means, share information widely, with the actors you can’t stand as well as the ones you consider “credible.” By all means, work out any trivial differences in wording that might otherwise be mistaken for differences of opinion. Where there are actual differences of opinion, feel free to coordinate what you say *about* those differences; it’s worthwhile showing the public that you’re aware of them, that each side respects the other, that the disagreement isn’t keeping you from taking action, and that you wish (as they do) that the answer were obvious but sadly it isn’t. Don’t try to hide the differences in the name of coordination.

Easier Said than Done

My final comment on the best practices may be the most important. In an article as short as this, with only a few paragraphs on each of the best practices, they come out sounding pretty abstract but also pretty obvious—so obvious, in fact, that the reader may fail to notice that they are extremely difficult to implement and very seldom accomplished. They’re not so much best practices as they are aspirational goals. Any reader whose overall response is, “Yeah, we do most of that,” has been ill-served by the article. Odds are you don’t. Almost nobody does.

The best practices wisely concede that candor and openness are tougher goals than honesty (#5). But in fact, all ten of these recommendations are tough. They fly in the face of organizational culture, of individual ego, of technical hubris. Above all, they fly in the face of the well-meaning but mistaken conviction that the public, like the crisis itself, needs to be “managed.”

As the various commentaries exemplify, there are still some significant areas of dispute among those who claim to know how to do crisis communication. It is worth the effort to hash out these differences and keep trying to produce lists of consensus best practices—although it will come as no surprise that I think the areas of dissensus should also be codified, not papered over. But our disagreements about the best practices in crisis communication pale to insignificance beside the huge gap between our shared recommendations and the actual practices of most practitioners.

This is probably the most fruitful area for further research. Are we consultants and academic experts hopelessly idealistic and impractical, or are practitioners mired in outmoded and unfruitful habits? What are the barriers to implementing these best practices? Which of the barriers are inherent in the crisis situation itself? Which are characteristics of how crisis managers perceive the situation? (Like the public, crisis managers are prisoners of their perceptions—for example, the perception that people will panic if they are told the unadorned truth.) Do we need fallback positions that are more implementable than our theoretical best practices? Do we need new ways of talking—and listening—to practitioners?

Is the very phrase “best practices” part of the problem, implying as it does that *we* know what *they* should do? This sounds embarrassingly like the way crisis managers think of the public. It should not be the way crisis communication experts think of the crisis managers.