The Anthrax Attacks: Impact on Health Communication

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Vicki S. Freimuth, Ph.D.
Associate Director for Communication
Office of Communication
Centers for Disease Control and Prevention
# Bioterrorism Communication

## Audiences

- Public—General vs. Affected
- Public Health Professionals

## Channels

- Media
- Public Inquiries
- Web
- Public Meetings
- HAN/EPI-X
- Response Line
- Conference Calls
- Web
- Satellite Training Broadcasts
Bioterrorism Communication (Continued)

Audiences

- Clinicians
  - Response Line
  - Partnerships—AMA
  - MMWR
  - Web

- Policymakers
  - Phone Calls—Staff, etc.
  - Briefings
  - Partnerships—Corporate, Government
  - Web
Challenge of Communicating Uncertainty

- Attacks unprecedented
- Little scientific evidence to work with
- Fear that acknowledging uncertainty leads to panic
- Changing practices based on evolving knowledge treated as mistakes
- Reluctance of scientists to make recommendations with inadequate evidence
Challenge of Selecting Credible Spokespersons

- Politicians vs. scientists as spokespeople
- Reassurance vs. candor
- Expertness vs. empathy
Challenge of Collaboration Within and Across Organizations

- Who’s in charge
- Clashing organizational cultures, e.g., CDC, FBI, USPS
- Developing trust in highly stressful situations
Challenge of Satisfying 24/7 Competitive Media

- Information rapidly changing
- Information new and highly technical
- Attacks on media created more outrage and anxiety
- Clash between scientific and criminal traditions
Challenge of Managing Information in an Emergency

- Visual display of complex data
- Lack of standardizing database formats
- Focus on collecting data with no time for analysis
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Questions???