



Inform vs Persuade



Inform vs Persuade



Informed consent in medicine Forensic evidence in court

Marketing PR



Inform vs Persuade

Informed consent

Marketing

Public health?



Inform Persuade VS **Understand** Believe VS Better informed Changed behaviour VS Information A message VS

VS



Be trustworthy

Be trusted

Trustworthy & useful communication...

To individual and policy decision-makers



1) Balanced information...



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NHS Glos CCG @ @GlosCCG · Jan 21

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The coronavirus (COVID-19) vaccine is safe and effective. It gives you the best protection against coronavirus.

You cannot catch coronavirus from the vaccine **





1) Balanced information...

For 18-64 year olds:

POTENTIAL BENEFITS From 2 weeks after 2 nd dose			
	Dummy injection (10,521 people)	Vaccine injection (10,551 people)	What difference did the vaccine make?
Number who developed	156	7	149 fewer cases
symptoms confirmed to be	(1.5%)	(less than 0.1%)	(95.5% reduction in
COVID-19			COVID-19 cases)

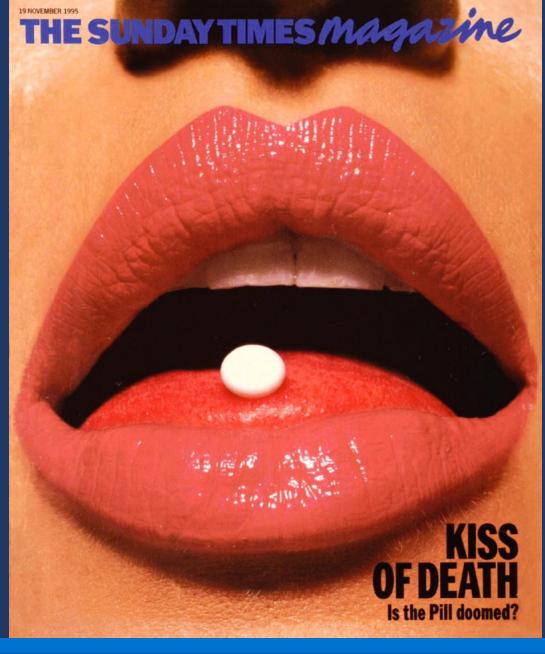
POTENTIAL HARMS*				
(usually lasting 2-3 days)				
Number who reported:	Dummy injection	Vaccine injection		
	(10,315 people)	(10,357 people)		
Pain at the injection site	1,942	9,335		
(some also reported redness and swelling)	(18.8%)	(90.1%)		
Swollen/sore armpit glands	444	1,654		
	(4.3%)	(16%)		
Fever	38	1,806		
	(0.4%)	(17.4%)		
Headache	2,617	6,500		
(a similar number reported other 'flu-like	(25.4%)	(62.8%)		
symptoms such as fatigue, aching joints,				
chills)				
Nausea/Vomiting	754	2,209		
	(7.3%)	(21.3%)		

Kerr et al, 2021



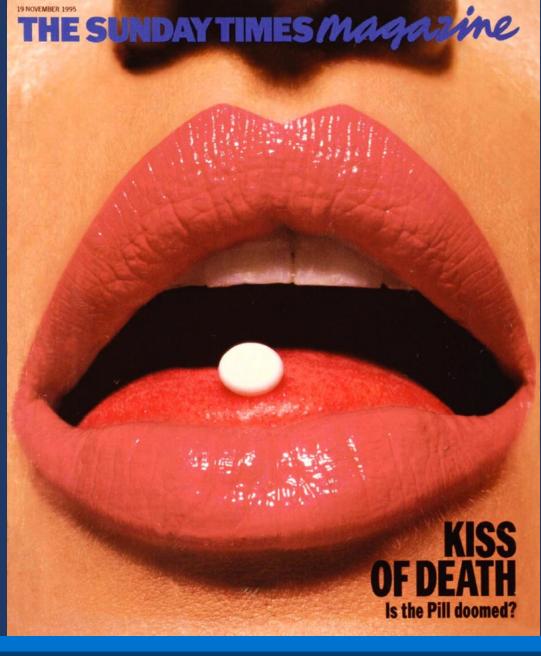
Numbers need context as well...





The 3rd generation oral contraceptive pill 'doubles' the rate of potentially fatal venous thrombosis

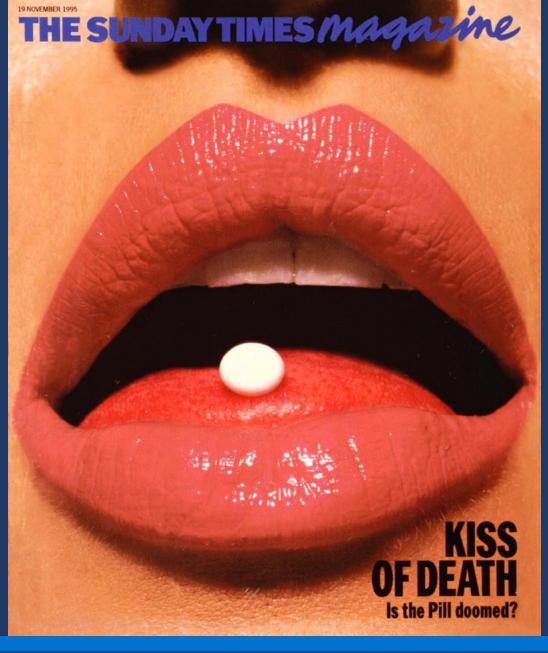
UK Committee on Safety of Medicines 1995



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10,000 extra abortions 30,000 extra conceptions



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Absolute risks (actual likelihood):

1 in 7000 per year for 2nd generation pill

2 in 7000 per year for 3rd generation pill

(Barnett & Breakwell, 2003)







How can we help people understand 'their risk' from COVID?



How can we help people understand 'their risk' from COVID?

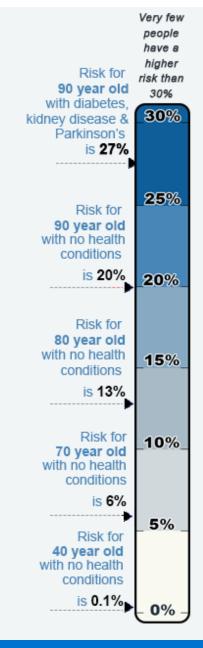
- Absolute risks (chances for any one person) very low
- Relative risks (context): 'relative to what'?



How can we help people understand 'their risk' from COVID?

- Absolute risks (chances for any one person) very low
- Relative risks (context): 'relative to what'?
 - Can't give a chance over time as it's a new risk not like earthquakes
 - Relative to other causes of death for that person? Are they helpful?
 - Relative to another person's COVID risk? Whose?





Please note the numbers on this scale were made up for our study – they weren't known at the time!

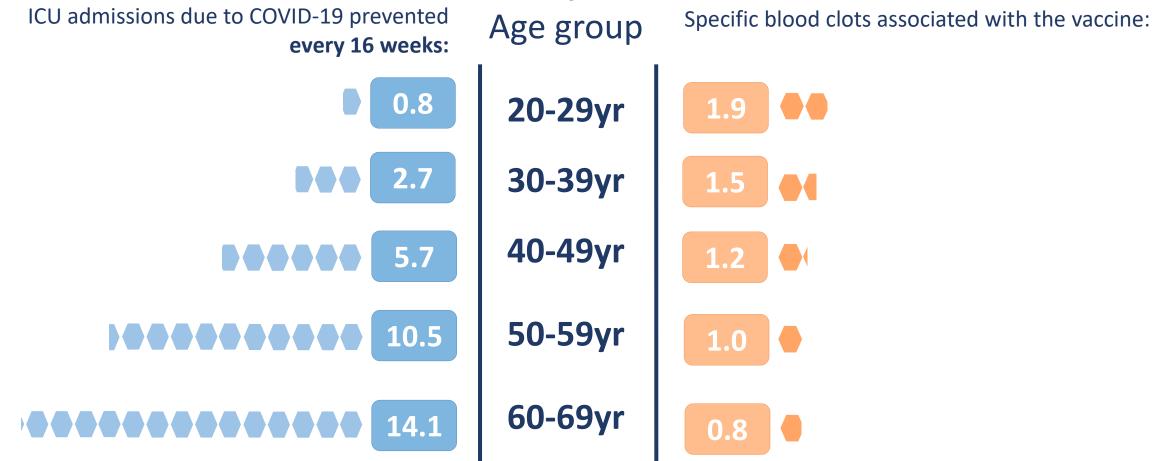


Weighing up the potential benefits and harms of the Astra-Zeneca COVID-19 vaccine

Potential benefits

For 100,000 people with low exposure risk*

Potential harms



Other potential benefits not shown include prevention of COVID-19 cases not leading to ICU and reduction of transmission

Other potential harms not shown include short-term side effects Data from reactions to first dose only

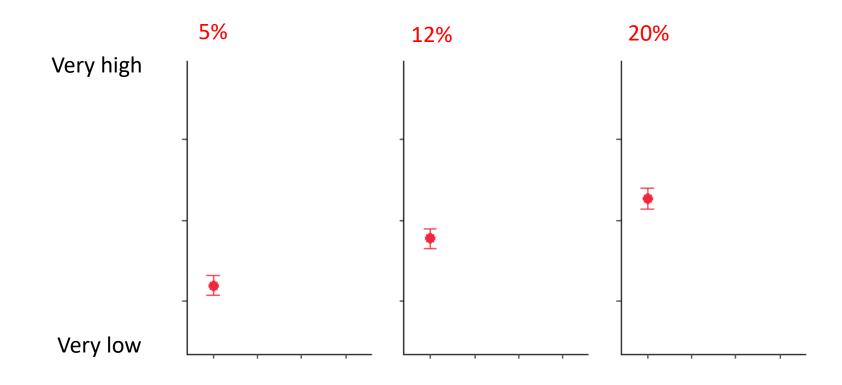
Data from UK up until 28th April 2021

It's not just what you say, it's the way that you say it...



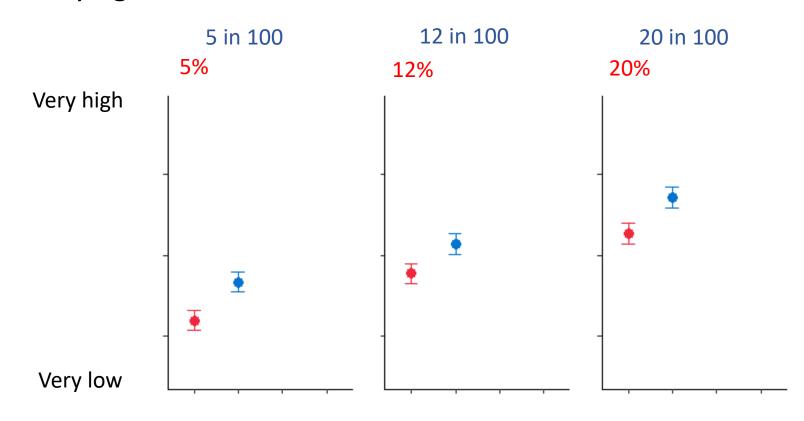
Even the format of the number makes a difference...

How risky does this chance of dying of COVID-19 feel...



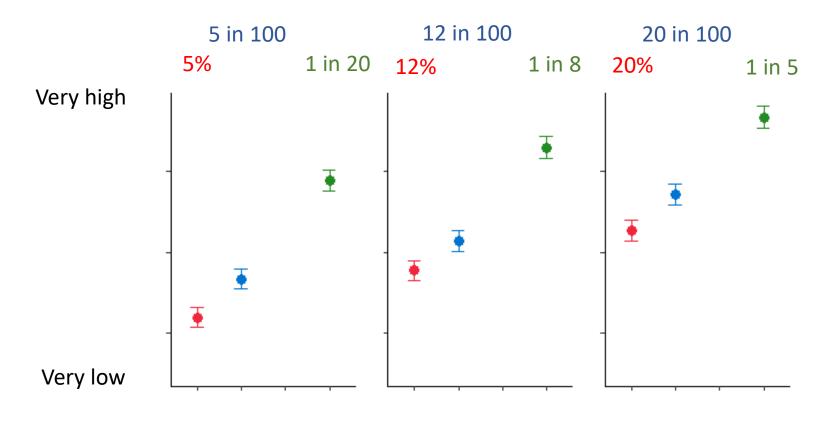
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UK unemployment falls to 1.44 million

○ 24 January 2018 □ 1350











UK unemployment fell by 3,000 to 1.44 million in the three months to November, official figures show.

The number of those in work increased sharply and wages rose at their fastest rate in almost a year, the Office for National Statistics said.

Family & Education Business Business Market Data Your Money Markets Companies

UK unemployment falls to 1.44 million

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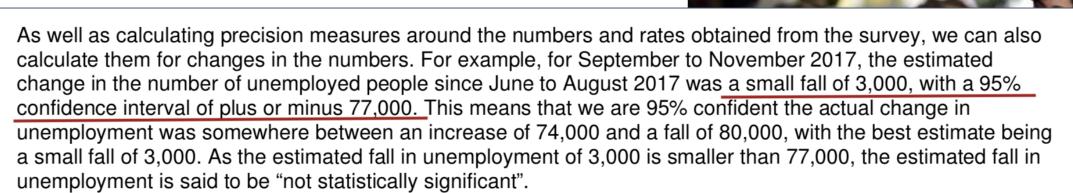
○ 24 January 2018 □ 1350













Uncertainty and trust

10,707 people

12 countries

5 continents

No uncertainty condition:

"Illness due to COVID-19 infection is generally mild, especially for children and young adults. However, it can cause serious illness: for people aged 70-80, about 17% of those who catch it need hospital care."

Numerical uncertainty condition:

"Illness due to COVID-19 infection is generally mild, especially for children and young adults. However, it can cause serious illness: for people aged 70-80, about 17% (range between 10% and 34%) of those who catch it need hospital care."

Verbal uncertainty condition:

"Illness due to COVID-19 infection is generally mild, especially for children and young adults. However, it can cause serious illness: for people aged 70-80, about 17% of those who catch it need hospital care. There is some uncertainty about that percentage, it could be somewhat higher or lower"



3) Quality of the evidence



3) Communicating quality of underlying evidence is different

What protects against COVID-19 infection or transmission?



^{*} High quality: we are very confident that the true effect lies close to that of the estimate of the effect.

Low quality: our confidence in the effect estimate is limited; the true effect could be substantially different from the estimate of the effect.

Schneider et al, 2021



John Krebs' checklist

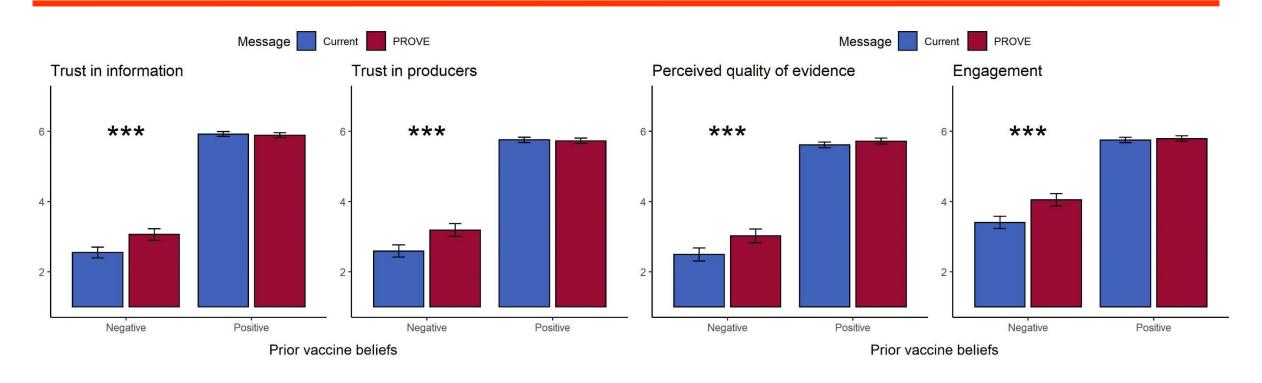
- 1. What you know
- 2. What you don't know
- 3. What you are doing to find out
- 4. What we can all can do in the meantime to be on the safe side
- 5. That advice will change (and when/how you will update it)



Trustworthy messages and prior beliefs



Trustworthy messages and prior beliefs



Trustworthiness (providing balance, uncertainty, quality of evidence cues, pre-empting misunderstandings) matters most to those who are initially skeptical.

In summary, to give people information on which to base decisions:

- 1) Listen to your audience: what information do they need, what decision are they making?
- 2) Provide appropriate context and balance don't ignore inconvenient evidence or cherry-pick.
- 3) Be balanced in the way you present evidence as much as in the information itself be aware of the effects of different formats, framings etc.
- 4) Be upfront about your uncertainties, and how you are resolving them.
- 5) Communicate the quality of your evidence
- 6) Pre-empt misunderstandings or misinformation.

