

SARS Exercise: What Are They Doing?

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In March 2003, the World Health Organization declared an unprecedented global alert about an unnamed disease that would soon be called Severe Acute Respiratory Syndrome (SARS). Here are some highlights from the ensuing months. For each numbered item, try to identify which of our 25 recommendations is being followed or not followed. Most are examples of several recommendations at once.

As you complete the exercise, notice that the good examples sound fairly normal ... as normal as the bad examples. Good crisis communication can feel wooden at first. But to the audience it sounds fine.

March 2003: The first few days after the global alert:

1. Dick Thompson of the World Health Organization told reporters that because there had been so few deaths so far, “one might think we are overreacting to the cases. But when you do not know the cause, when it strikes hospital staff, and it certainly is moving at the speed of a jet, we are taking this very seriously.”
2. The WHO’s David Heymann said: “It is not clear what is going on and it is not clear what the extent of the spread will be.... It is a very difficult disease to figure out.” Heymann added that the global alert “was a pretty radical decision, and I didn’t sleep that night because I knew that what we were doing was going to have a lot of different repercussions.”
3. Hong Kong Secretary for Health E.K. Yeoh said: “Hong Kong is absolutely safe and no different from any other big city in the world.... Hong Kong does not have an outbreak, okay? We have not said that we have an outbreak. Don’t let the rest of the world think that there is an atypical pneumonia outbreak in Hong Kong.”
4. Reporters asked Julie Gerberding of the U.S. Centers for Disease Control and Prevention if the mysterious outbreaks could be related to bioterrorism. “While we have lots of reasons to think that the SARS outbreaks are not due to terrorism, we’re keeping an open mind and being vigilant.”

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5. Canadian customs officers in Toronto wanted to wear face masks and gloves, but Canada's federal government refused. Ron Moran, president of the Customs and Excise Union, said: "They don't want to create – in their words – 'panic' by officers wearing a mask. But there is a lot of uncertainty around this ... and our people are concerned." The Customs and Revenue Department said that since health guidelines did not require airport staff to wear masks, no masks would be provided. Toronto taxi drivers and Air Canada flight attendants also wanted the option of wearing masks, but were either highly discouraged or forbidden to do so.

Late March through mid-year 2003: The outbreaks worsen, peak, begin to fade:

6. When several Asian countries warned against travel to SARS-afflicted Singapore, Prime Minister Goh Chok Tong responded: "We can understand that, because we also give travel advisories to Singaporeans not to go to the affected places. So we must expect other countries to advise their travellers not to come to Singapore.... If we are open about it and all Singaporeans cooperate by being as careful as they can, we may be able to break this cycle early, and if we do then of course people outside will have confidence in Singapore and the way we manage the problem."
7. When the WHO instituted a travel advisory for Toronto, Ontario Health Commissioner Colin D'Cunha said: "We believe this decision was made without consulting the province – we believe it was an over-reaction." Toronto Mayor Mel Lastman said: "The medical evidence before us does not support this advisory." The WHO conceded that Canada had not had proper advance warning. "There was a breakdown in communications," said the WHO's Dick Thompson. "I think that we're willing to acknowledge that there was some kind of mistake, that they didn't receive the message.... And I think we're ready to accept some blame here."

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8. The WHO had estimated the maximum SARS incubation period (on which quarantines are based) at ten days. But then previously withheld information from Guangdong, China, was released to the WHO. The WHO's Dick Thompson updated the press, stating: "The longest possible incubation period that we've seen [in Guangdong] is 14 days." When a reporter asked about the previous 10-day figure, Thompson added: "That's what I would have told you before we had access to the Guangdong data."

9. Asked if Ontario (Canada) health officials were going to increase the required quarantine period in light of the WHO's new information on incubation, Public Safety Commissioner James Young said: "We have to weigh our experience with what happens in regards to obvious public safety but also people's needs to get on with their lives.... We're not saying that we wouldn't change. If our experience began to show everyone developing symptoms in Day 9 and 10, we would likely expand the isolation period. But that's not been our experience to date."

10. Singapore officials sought citizen input at many public meetings on SARS policy. Among the issues debated: whether to make public the names of people under Home Quarantine Orders; whether to use volunteers, public servants, or contractors to tend (and monitor) people who were quarantined at home; whether to close the schools for a while. All Singapore schoolchildren were given thermometers and asked to keep temperature logs twice a day. The Prime Minister, well-known for shaking hands with everyone, recommended instead the namaste bow for the duration of SARS.

11. North Carolina State Epidemiologist Jeff Engel held regular media briefings about the state's one confirmed SARS case. A reporter asked if his press conferences had the potential to cause more hysteria and fear. Dr. Engel replied: "Certainly a disease like SARS, so new, so frightening, should instill fear. Fear is an appropriate response – for me as a public health physician, for everyone in the community. We need to transfer that fear into positive energy.... This is a new disease, it spreads person to person, it can kill, it has a high case-fatality rate. That is newsworthy!"

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12. When the WHO's David Heymann said it seemed that SARS had peaked in Canada, Hong Kong, Singapore, and Vietnam, a reporter asked if he was confident that SARS' worldwide spread could be stopped. "No, we are not," he answered. "We are hoping." Singapore health ministry spokeswoman Eunice Teo commented: "The WHO said the peak is over in Singapore, but our minister has said it is too early to tell." Health Minister Lim Hng Kiang said the WHO's encouraging words were premature, adding: "Our basic tone must be to be extra careful, extra vigilant and if anything to err on the safe side."

Late 2003 and early 2004: A few isolated cases but no new outbreak (yet):

13. When a virology graduate student in Singapore was diagnosed with SARS, reporters and the public wondered if he caught it at his lab (it turned out he did). A medical official and a WHO expert said a lab exposure was the likeliest hypothesis. But the Singapore Health Ministry would not comment. A spokesman said: "A full investigation is currently under way. Let's await the result." A laboratory official offered his own "speculation": "There is absolutely no way he could have been given the wrong virus."
14. When a Taiwanese lab worker also contracted SARS on the job, SARS anxiety resurfaced in Asia. Thai Prime Minister Thaksin Shinawatra told his people not to worry: "Thailand was even safe from SARS in the previous spread in the region earlier this year, as we cooperated closely with the World Health Organization and strictly followed WHO's suggestions on SARS prevention. We've gained experiences from that. So, we'll be safe from SARS again, given the government's awareness and preparations."

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15. When China had the first confirmed 2004 case, anxiety increased among both health officials and the public. The WHO's Beijing spokesman, Bob Dietz, said: "Everyone's getting edgy." Added the WHO's Dick Thompson: "Nobody really knows if there will be another epidemic. Many people say so and there are some reasons to suspect that there will be another round, but we just don't know. As we have seen in Singapore and Taiwan, it is clear that a single case doesn't necessarily mean another round."

16. When the WHO had recommended against unnecessary travel to Toronto, the U.S. CDC had advised only avoiding Toronto health care settings. Now that the outbreaks were over, the U.S. urged the WHO to "harmonize" its standards with those of the U.S. Health and Human Services Secretary Tommy Thompson argued that harmonization "would be much better, instead of the United States having a travel advisory and the WHO having a travel advisory – people wouldn't know which one to follow."

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Answers:

1. Be explicit about “anchoring frames”; err on the alarming side; don’t aim for zero fear [good example].
2. Acknowledge uncertainty; establish your own humanity [good example].
3. Don’t over-reassure; aim for total candor and transparency [bad example].
4. Put reassuring information in subordinate clauses [good example].
5. Tolerate early over-reactions; don’t overplan or overdiagnose for panic; let people choose their own actions [bad example].
6. Legitimize people’s fears; tolerate early over-reactions; ask more of people; aim for total candor and transparency [good example].
7. Don’t over-reassure [bad example – Canada].
8. Apologize often for errors, deficiencies, and misbehaviors [good example – WHO].
9. Be explicit about changes in official prediction, opinion, or policy [good example – though it would have been better still if Thompson had described the change as a change before being asked].
10. Share dilemmas; tell people what to expect [good example]. Err on the alarming side [bad example].
11. Share dilemmas; offer people things to do; ask more of people [good example].

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12. Legitimize people's fears; establish your own humanity; err on the alarming side; don't aim for zero fear [good example].
13. Acknowledge uncertainty; put reassuring information in subordinate clauses; err on the alarming side [good example].
14. Be willing to speculate [good example of responsible speculation; bad examples of refusing to speculate and over-confident, over-optimistic speculation].
15. Don't over-reassure; acknowledge uncertainty [bad example].
16. Legitimize people's fears; don't overdiagnose or overplan for panic; establish your own humanity; acknowledge uncertainty; acknowledge opinion diversity [good example].
17. Acknowledge opinion diversity [bad example].

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