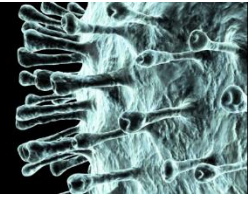




## COVID Conversations on Risk

Featuring: Pia-Johanna Schweizer, Ph.D., IASS Potsdam & Gilberto Montibeller, Ph.D., Loughborough University



### Addressing Real and Perceived Risks Associated with COVID-19

Key takeaways from the webinar with Pia-Johanna Schweizer and Gilberto Montibeller

**Perceived risks must be addressed** - There are two major drivers of perceived risks. The first one is dreadfulness. Seeing images of coffins in Italy, Spain and the U.S., overwhelmed hospital wards, people we know and famous people with severe health issues all send messages of dreadfulness. This increases the perceived risks. The second major driver is fear of the unknown. This is an emerging disease, there is no treatment and no vaccine, and very little is known about what happens to people who survive if they are infected again. Reactions like panic buying were predictable because it was the perfect storm of dreadfulness combined with the unknown. So far, governments have done little to address these intangible aspects and better manage perceived risks.

**Despite perceived risks, there are real tangible needs to address** – Countless experts have highlighted some very tangible things that need to be done, such as increasing the supply of ventilators and increasing testing capacity. There has been a shortage of ventilators in Britain and the U.S. because the government hadn't planned well enough and has had to urge producers to increase production and have turned to other types of producers such as automobile factories. Temporary field hospitals are emerging in convention centers, parks and gymnasiums in many countries. Countries like Britain and the U.S. lag behind other countries like Germany, South Korea and Italy in testing capacity. With resources that are going to become more and more limited, countries need to prioritize the tangible needs that bring the highest public value.

**Transparency and consistency are key** -- With such a fast-moving global situation, messages to the public are being blurred by the media. Media are picking up anything fresh before it can be properly vetted through the scientific review process. If we look historically at the MMR vaccine where non-vetted information was released in the public domain, vaccination rates began dropping in places like the U.S. and Britain and there has been a reemergence of the disease. Government leaders need to understand that despite all the uncertainty and the fast-changing situation, communication must be clear and non-conflicting, and be a joint initiative between government, scientists and media. One stand-out for good communication is German Chancellor, Angela Merkel. In her speech on March 18, she highlighted personal responsibility as a potential vector for the disease, and explained that social distancing is not just for those who are particularly at-risk but is a common responsibility of everyone, and the government's reaction would very much depend on each and every citizen.

**Lack of trust in institutions hampers systemic response** – In our interconnected world, addressing a pandemic requires support of and from all of society's essential systems and infrastructures. The general eroding of public trust in institutions, and in science in general, makes it difficult to communicate about fairness and equity issues while addressing the tangible needs and perceived risks. Systemic responses also require broad thinking that goes beyond the institutional inertia and short-term legislative initiatives that have become the core of governance. An interdisciplinary approach is required for a systemic response to the pandemic. This must be an integrated and joint effort of various disciplines to successfully govern the situation while balancing tradeoffs of stakeholders and the public.