

SPECIAL REPORT



**Expert Round Table on Social Media and
Risk Communication During Times of Crisis:
Strategic Challenges and Opportunities**

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NARRATIVE

Overview

Organizations working to protect public health and safety have built strong reputations based on sound science, years of service, and direct community engagement. Yet, the communications landscape is evolving rapidly, and the implications for managing messages and engaging the public to protect public health and safety—especially during times of crisis—can be staggering. Fortunately, a wealth of new and accessible communication platforms presents the possibility of reaching more people with more relevant messages than ever before.

Now that citizens are able to create content freely and distribute it wherever they please, the job of controlling their messages has become increasingly difficult. Government, commercial, and not-for-profit organizations must broaden their vision to understand how social media “tactics and tools” are embedded in their organization’s broader communication strategy.

Today’s portfolio of social media tools (e.g., blogs, social networking sites, Really Simple Syndication [RSS] feeds, texting and other formats) is already shaping how crises are communicated and responses are coordinated. To better harness the power of these new media tools, the “Expert Round Table on Social Media and Risk Communication During Times of Crisis” met on March 31, 2009, at the American Public Health Association (APHA) headquarters in Washington, D.C. A select group of thought leaders and practitioners who are engaged in public health, emergency response, and crisis communications presented

best practices, common pitfalls, and forward-thinking next steps for using social media to improve emergency communications.

The use of social media during emergencies—from the 2007 shootings at Virginia Polytechnic Institute and State University (Virginia Tech), to the 2008 terror attacks on Mumbai, to the 2009 salmonella-related peanut recall—is leading to a roadmap to help public health and emergency management craft a unified strategy on applying social media to crisis communications.

What Works, and Why Social Media Can Help

Social media are the various electronic tools, technologies, and applications that facilitate interactive communication and content exchange, enabling the user to move back and forth easily between the roles of audience and content producers.

“At its most basic sense, social media is a shift in how people discover, read, and share news, information and content,” according to Wikipedia, which itself is a social media tool because any Internet user can add content to a Wikipedia entry. “It’s a fusion of sociology and technology, transforming monologue (one to many) into dialogue (many to many) and is the democratization of information, transforming people from content readers into publishers.”

The explosion of social media—everything from social networking websites, to blogs, to broadcast text messaging—has changed the way in which anyone involved in risk





communications must look at overall communication plans. Especially in times of emergency, social media can and should be employed to transmit critically important information immediately to as many people as possible.

"It speeds up communication, and, for all practical purposes, it speeds up awareness," American Public Health Association Executive Director Georges Benjamin said about social media.

That kind of awareness—broad, strategic public engagement—was largely missing when the levees broke after Hurricane Katrina. A major challenge of social media, however, is a lack of confidentiality and a danger of non-verified information flashing around the globe at lightning speed. But considering that President Barack Obama has pledged transparency in government and recently steered a \$787 billion stimulus package that includes \$19 billion for health information technology (IT) through Congress, there has never been a better time to "stretch" into the world of social media and risk communication during times of crisis.

How do we do that? There definitely is no one-size-fits-all approach, but best practices are emerging, and experts and "newbies" are identifying ways to weave social media into existing risk communications strategies.

Since the terrorist attacks of September 11, 2001, the Centers for Disease Control and Prevention (CDC), for example, has developed innovative strategies for responding to public health emergencies.

In terms of risk communication, one example of how CDC officials use social media to reach the public is its "Hurricane Tip of the Week." This tip is not only posted on a hurricane website (www.bt.cdc.gov/disasters/hurricanes) but also e-mailed and "text messaged" to those who have registered to receive the tips. The weekly tip, which has more than 1,600 Twitter followers and 34,000 e-mail subscribers, also is available via widget.

"Social media is obviously about more than how we reach out to the public and educate the public," said Nathan Huebner, emergency risk communication specialist and lead for CDC's emergency websites. "It's about the public talking to us. It's also about the public talking to the public."

CDC has been working on disaster preparedness e-cards to encourage friends and family to take preparedness steps. In May, during National Hurricane Week, it launched about a dozen e-cards. The agency offers a mobile phone version of its website and a simple text version of all core content. Public service announcements are available as podcasts.

The Tip of the Week campaign is not solely about preparedness. CDC is building a subscriber base to extend its outreach on all health-related topics. And, as Huebner reminds us, it's important to remember entire populations when disaster strikes.

"With every crisis, you have your affected persons, and your vast majority who are the unaffected," Huebner said. "But I think it's really easy to dismiss the unaffected as just being the 'worried well.' I think that's a mistake. I think it's an enormously missed opportunity."

Instead of dismissing the so-called "unaffected" people—the people interested enough to follow a disaster-related Tweet and subscribe to e-mail alerts but who have not been affected directly—those people should be employed in a communication strategy.

"What I would say we should be doing is helping the affected stay safe, respond, and recover," Huebner said, and to...use the unaffected "as evangelists for the current response."





TIPS FOR USING SOCIAL MEDIA DURING EMERGENCIES

- Make social media efforts message driven, not channel driven.
- Embrace every possible teaching moment so that your social media networks can grow.
- Tap into all available resources. Do you have a large cadre of volunteers? Consider training them as social media ambassadors.
- Keep messages brief and pertinent. People are not really reading, they are scanning.
- Make sure you can receive public input. Remember that social media is not just about you talking to the public; it also is about them talking to you and to each other.
- Use social media to support a unified message. Instead of creating a new message for social media, use social media to support your existing message in a larger communications model.
- Have a Plan B. Suppose phone lines are jammed and/or computers are down?
- Forge partnerships for sharing methods and messages. Federal agencies, for example, need to reach out to the private sector, and vice versa.
- Focus on people when formulating your communication plan. Networks of people will get work done, even when there is no electricity.
- Avoid elitism or the belief that people in charge know more and the general public is prone to misbehavior.
- New technologies are not simply new types of media with which to do the same old things. These new media signal a shift in thinking about how we communicate with our audiences.
- Avoid “shiny new object syndrome” (being quick to adopt every new social media that emerges... as soon as it emerges).

Similarly, citizens can become health advocates by sharing CDC and Food and Drug Administration (FDA) messages about key health issues such as the early 2009 salmonella-related peanut recall. Ann Aikin, with CDC's National Center for Health Marketing, remarked that e-cards have been a boon to the agency's outreach efforts. These e-cards offer health information, sometimes as simple as the following: Get a flu vaccine. Your patients are counting on you.

More than 100,000 people have opened those health e-cards; in fact, one such message was sent 2,113 times so far. These cards enable citizens to become health advocates on topics such as the salmonella-related peanut butter recall. More than 2,400 salmonella-related e-cards were sent in early 2009, and more than 172,000 total e-cards have been sent since the effort's launch.

The agency encourages outreach via mobile phone because such communication tools are becoming more pervasive than traditional land lines. Eighty-five percent of Americans use mobile phones compared with 80 percent who use home personal computers, 69 percent who use digital cameras, and 40 percent who use MP3 players. Age and racial or ethnic makeup also matter. Eighty-nine percent of young adults, ages 18 through 34, own a mobile phone

compared with 57 percent who own a landline. In the second half of 2008, 25 percent of Hispanics owned only a mobile phone compared with 21.4 percent of African-Americans and 16.6 percent of Caucasians.

“The New Face of AIDS: A Mobile Media Experience” is an example of CDC's public service efforts using mobile phones. On World AIDS Day in 2007, public service announcements were pushed to mobile phone and web users, with those same messages transmitted again on HIV Testing Day in June 2008. Streaming video that users created drove home the HIV awareness message.

According to Aikin, mobile messages also can be key in international areas. In Kenya, which has 33 million people, there are 11.3 million mobile phone subscribers but only 264,000 landline and 3 million Internet users. An opt-in system for blood donors enables them to receive text message reminders stating when they are eligible to donate again and messages calling for donors of specific blood types during critical shortages.

Other health marketing tools from CDC include community voice mail that sends voice and e-mail messages to nearly 405 social service agencies, outreach to bloggers (by 2012, more than 145 million people, or 67 percent of

the U.S. Internet population, will be reading blogs at least once a month), Twitter, widgets, and social networks.

Widgets (i.e., small programs that users can download onto their computers or embed in their social media profiles or blogs to pass along to others) have proven a particular health marketing boon. During the peanut product recall, there were more than 15.5 million page views of the salmonella peanut product recall widget, which included a searchable database of recalled products, and 20,450 people added this widget to their website, blog, or social networking page.

Tapping Volunteers

“The social media network of the American Red Cross came of age during Hurricanes Ike and Gustav in 2008,” said Laura Howe, the group’s senior director of public affairs. The organization had to battle against the fear of using social media and also beware of what Howe described as “shiny new object syndrome.” As new social media tools emerged, some wanted to jump on each technology bandwagon.

For the Red Cross, the answer was to develop a disaster online philosophy: use social media to empower clients and supporters to get or give help during a disaster. It does this by maintaining six official platforms as points of engagement, providing content for and contact with media outlets, and striving to use social media and all its communications platforms to acquire more information than they give out.

“We want to listen so that we can hear from people who need our help during a disaster,” she said, “and from loved ones who also need to know what is going on.”

In what first seemed like an impossible task—but has since become the backbone of the Red Cross social media success story—150 public affairs volunteers received training on how to use social media. Howe said, “the results have been absolutely amazing.”

Volunteers upload content onto a website, and Red Cross personnel screen that information for appropriateness. So far, not only have volunteers readily embraced the new technology, but also, “everyone’s been very responsible in what they’re doing.”



The salmonella peanut product recall widget was a key component in alerting the public early to potentially tainted food products during the 2009 recall. Partnership between the Food and Drug Administration and the Centers for Disease Control and Prevention was critical to the success of this tool.

Red Cross platforms include a WordPress blog, Facebook page, and disaster online newsroom. The latter includes shelter locations, numbers of meals served, and other information the media might want to use. Red Cross Twitter has 10,000 followers. Tweets cover topics such as shelter and preparedness information, on-the-ground situational awareness, and a review of abundant CDC information.

Flickr photo posts averaged 4,000 views daily during Hurricanes Ike and Gustav and helped the Red Cross “get the word out and let people know what was happening,” Howe said. The agency also uses Utterli, a service that enables users to call a toll-free telephone number to upload audio.

The overall benefits are as follows:

- The number of calls from media during disasters has become more manageable.
- The Red Cross has learned that it is easy to tap into other social networks to spread its word when needed.
- Overall, responders state that they have better access to situational awareness information.



RECOMMENDATIONS ON CORE CHALLENGES

Round Table participants formed four breakout groups to tackle core challenges to social media use—public/private partnerships; evaluation and metrics; capacity and resources; and social media and communications strategy—and develop recommendations going forward.

	Public/Private Partnerships	Evaluation and Metrics	Capacity and Resources	Social Media and Communications Strategy
Goals	<ol style="list-style-type: none"> 1. Form best practices for adoption of social media 2. Identify social media strategically 3. Develop strategic goals and evaluation strategy 	<ol style="list-style-type: none"> 1. Measure engagement qualitatively 2. Continue to make improvements 3. Validate efforts and methods 	<ol style="list-style-type: none"> 1. Gain support of leadership 2. Integrate with communications and emergency strategies 3. Be proactive rather than reactive 	<ol style="list-style-type: none"> 1. Build value of content, and establish yourself as a subject matter expert in advance of crisis 2. Allow organizations to disseminate information without a filter 3. Define a target audience
Barriers	<ol style="list-style-type: none"> 1. Life-cycle issue 2. Restricted access to social media tools at work 3. IT and legal barriers 	<ol style="list-style-type: none"> 1. Costs and competing resources 2. Data coding 3. Inaccurate perceptions of problems lead to faulty information being reported as fact 	<ol style="list-style-type: none"> 1. Funding 2. IT and physical security 3. Cultural barriers 	<ol style="list-style-type: none"> 1. Buy-in of senior leadership 2. Cyber security 3. Sustainability
Promising Approaches	<ol style="list-style-type: none"> 1. New metric tools (e.g., Omniture) 2. Partnerships between government and less-constricted organizations 3. Leadership champions 	<ol style="list-style-type: none"> 1. Examine quantitative and qualitative data both externally and internally 2. Keep objectives measurable 3. Use pilot programs to overcome barriers 	<ol style="list-style-type: none"> 1. Mobilize by grassroots 2. Look to CDC's salmonella widget success 3. Use social media strategically rather than dabbling in social media 	<ol style="list-style-type: none"> 1. Incorporate volunteers into social media process 2. Use low-budget techniques such as flip cams rather than high tech video production 3. Build advocacy or fundraising into social media
Lessons Learned	<ol style="list-style-type: none"> 1. Reach out to content providers, including citizens and users 2. Understanding how people approach social media helps form communications strategy 3. New, popular technology can fade fast 	<ol style="list-style-type: none"> 1. Determine measures of effectiveness 2. Develop best practices 3. Develop guidance document on types of evaluation for social media 	<ol style="list-style-type: none"> 1. Integrate social media into existing communications strategy 2. Establish networks in advance 3. Educate employees and leadership in social media 	<ol style="list-style-type: none"> 1. Remember that people are there because they want to be engaged (opt-in system) 2. Balance call-to-action and education 3. Overcome technical hurdles (e.g., cell phone towers down after hurricane)
Priority Actions	<ol style="list-style-type: none"> 1. Provide data 2. Create meaningful public engagement 3. Coordinate partnerships with as broad a community as possible 	<ol style="list-style-type: none"> 1. Institutionalization: Make evaluation a part of strategy 2. Prioritize metrics and industry standards 3. Develop research agenda 	<ol style="list-style-type: none"> 1. Establish strategy and ensure that you are using the right tool for the right audience 2. Integrate with communications strategy 3. Determine which existing communities you can get involved with rather than creating a new community 	<ol style="list-style-type: none"> 1. Examine new social media options 2. Identify ways in which traffic can be driven to social media outlets 3. Seek ways for motivating the leadership to get involved with social media
Keys to Success	<p>Priority actions are keys to success</p>	<ol style="list-style-type: none"> 1. Resources and funding 2. Leadership support 3. Partnerships with subject matter and social media experts 	<ol style="list-style-type: none"> 1. Create evidence base 2. Determine demand for social media 3. Educate public health community about value of social media tools 	<ol style="list-style-type: none"> 1. Ensure that information is authentic and useful to the public 2. Integrate social media strategically with organization's objectives 3. Become a community and bridge the cultural divide by forming relationships
Performance Measures	<ol style="list-style-type: none"> 1. Number of partners 2. Diversity of partners (government vs. private groups and single users) 	<ol style="list-style-type: none"> 1. Behavior change 2. Communication efficiency 3. Case studies 	<ol style="list-style-type: none"> 1. Behavior change 2. Measure increase in traffic 3. Feedback from communities 	<ol style="list-style-type: none"> 1. Measure hits to certain outlets 2. Measure feedback 3. Seek new ways for measuring how social media is impacting the organization

Widgets Can Work

The recent salmonella-related peanut recall posed a wide-spread public health challenge that was ripe for social media help. Peanuts are an ingredient in a long list of products, they have a long shelf life, and almost every household has at least some peanut products in its cupboards. As of March 30, 2009, 3,800 products had been recalled.

Online technology allowed FDA to maintain a product recall database that consumers could search by universal product code (UPC), product description, or brand name. Yet federal officials needed a way to make sure the public knew how to access it.

CDC officials then built a widget to drive people to the database. "It gave so many more people the opportunity to get that information," said Andrew Wilson, web content manager for the U.S. Department of Health and Human Services (HHS).

Calling it "The Little Widget That Could," HHS officials said that the most successful part of their social media communications during the salmonella outbreak and related recall met two goals: raising public awareness, and allowing the public to be involved directly in "exponentially increasing" awareness.

On February 3, 2009, HHS held a salmonella-related webinar for bloggers, knowing those bloggers were important to getting the word out accurately. Buttons and badges enabled partner organizations and web users to display

simple images and messaging related to the recall. Blogs at HHS and CDC contained good examples of "being able to cross boundaries," said Wilson, and a related Twitter (www.newmedia.hhs.gov) had roughly 3,000 followers.

Changing Old Ways of Doing Things

At the Federal Emergency Management Agency (FEMA), John Shea serves as public information officer for new media. He believes that legal issues and internal politics are roadblocks to establishing social media policy. They can be overcome by educating people internally to achieve buy-in on the myriad uses of social media, and by tackling the legal issues in the best way possible. For example, there is a pending General Services Administration (GSA) agreement that any agency will eventually be able to use to start a social media application.

Typically, federal agencies have a particular way of accomplishing tasks, which poses a particular challenge in the communications climate that adopts social media. What will happen to old standbys such as *Federal Register* notices? Is a Tweet valid during a public comment period on a new regulation? If so, what should an agency do with the Tweet to ensure that it is accessible universally?

The tools and tactics are still emerging, and as they mature we'll better define measures of effectiveness and next steps, according to Grant McLaughlin, Booz Allen principal, an expert in strategic communications, marketing, and stakeholder outreach.





Still, the ultimate goal is to be able to use social media to communicate quickly and effectively during emergencies. And it is important to have space that allows multiple voices to be heard.

Another key to success: Centralize use of social media to eliminate multiple communication strategies from multiple departments. In an early March 2009 survey of how organizations are using social media, more than 22 percent of participants said that each unit or department acts independently and oversees its own social media use (see page 12).

A common barrier to adopting social media in communications strategies can be the fear that too much information too soon will create panic. But as award-winning author Amanda Ripley reminds us, people can handle the truth.

From researching her book *The Unthinkable: Who Survives When Disaster Strikes—and Why*, Ripley learned that humans are amazingly polite to each other during crises. In fact, people actually become highly social during disasters. “I think it’s something we wildly underestimate, again and again,” Ripley said.

According to her, communicators can take away a lesson from the way people behaved during the World Trade Center attacks of September 11, 2001. Once the planes crashed into the towers, it took an average of 6 minutes for people to enter the stairways. Once in those stairways, people moved at a pace of about one floor per minute, or about half the speed safety engineers would have predicted. While the fires were raging and the towers were on the verge of collapse, people routinely exited the stairwell, checked CNN on an office television, went to vending machines, and talked with each other.

“The brain operates very differently under a threat,” Ripley said. In addition to becoming very social, people also deliberate about what steps to take. When told to evacuate before a hurricane, for example, Ripley found the average person checks with four to five sources, such as a news anchor, a neighbor, a spouse and a website, before deciding whether to pack up and go. Using social media during times of crises requires communications to tap into people’s need for comfort and human connection.

HOW TO ESTABLISH SOCIAL MEDIA BEST PRACTICES

- Develop a research agenda that will allow for evaluation of the effectiveness of social media in a disaster communications model.
- Use subject matter experts to help with data collection.
- Initiate a cultural shift. Allow your group/agency the room to grow in developing a new approach to social media. This is where leadership is key.
- Get feedback from users in the community.
- Be aware of the three main barriers to adopting social media: (1) leadership buy-in, (2) sustainability, and (3) IT/access issues.
- Remember that people are there because they want to be. They are not being forced into a social media environment.
- Seek ways to address technical hurdles (e.g., mobile phone towers not working during a hurricane).
- Think partnerships. For example, use groups such as the American Public Health Association (APHA), which might not have the same constraints as a government agency, to help you expand your social media communications tools. It’s all about partnering—with your leadership and with your community.
- Keep trying. Best practices will emerge.
- Balance core capacity with social media capacity. Know that part of any communications strategy includes balancing time and resources.
- Be relevant. Do not “spam” users with too much information.
- Choose a few social media tools and develop them well.
- Realize that social media is a moving target. Be flexible and use volunteers and community members to help you adapt your communications strategy accordingly.
- Focus on building relationships. Work to give the public a way to engage.

Another lesson, according to Ripley, is to avoid elitism, or thinking that people in charge know more and everyone else is prone to misbehavior.



Indian citizens and journalists seek protective cover near one of the attack sites in Mumbai in November 2008. Social media tools such as Twitter, mobile text messaging, and Flickr provided the earliest reports from the siege.

"I would argue that more people have died because of the official fear of panic than of panic itself," she said.

FEMA is known in government communications circles to use social media very effectively, and one area the agency has been tackling is explaining exactly its role during disasters. Rather than respond directly to emergencies, the agency coordinates response efforts and ensures resources are available where they are most needed.

FEMA narrowed that information gap via a 1-hour news conference on Twitter. The public presented questions to David Paulison, administrator at FEMA, and he responded to them directly through Twitter. Later, a full transcript and audio/video from the session were posted online. A week later, FEMA held a "bloggers' roundtable," and these participants also had direct access to Paulison.

FEMA also wanted to use social media to make people aware of the state-funded disaster recovery centers it manages.

"It's not, 'Hey, join our Facebook page and your recovery's going to be swell,'" Shea said. "We want to help them get the help they need."

Twitter has been one of FEMA's most active social media tools, and the agency's YouTube channel helps tell the story of disaster preparedness and response. The agency ensured that its communications strategy is expandable to each of its regions. In this way, the agency's message is not being delivered from Washington, D.C., but from local outlets. Another key, according to Shea, was using existing approved and tested communications workflows, integrating social media into communications plans, and leveraging national networks (like those of CDC and Red Cross) to provide visibility for locality-specific messaging.

For example, during the Boulder, Colorado, wildfires in early 2009, one of the most active Tweepsters was a graduate student doing extensive individual research. FEMA worked to leverage her followers and encourage interaction with her network to help amplify messages about the federal response to the fires.

Controlling the Message: Is It Possible Anymore?

One concern for many of those who are involved in crisis communications is that when disaster strikes, images are posted on Flickr, and words are already flying around on Twitter and Facebook before CNN can issue its first broadcast.

"What that has done to us from a public affairs standpoint is it's taken us out of the game for any media strategy," said Richard Kolko, chief of the FBI's National Press Office.

Adjusting to this new communications reality is key not only for his agency but for all involved in coordinating messages so those who receive the word are not overwhelmed.

During a 60-hour siege in Mumbai, India, in November 2008, terrorists killed at least 173 people and injured more than 300. The 10 gunmen, well armed with assault rifles and grenades, Kolko pointed out, "were experts in communications as well." Media outlets unintentionally interfered with police efforts by pinpointing for the terrorists where law enforcement was arriving by helicopter.

Meanwhile, the terrorists had effectively used tools such as Google Earth maps and photos to scout a location before the deadly attack and used a Global Positioning System (GPS) device to navigate across the Arabian Sea. Hostages and resident witnesses were transmitting harrowing accounts and images using short message service (SMS) text on their mobile phones, Twitter Tweets, and Flickr images. Those user-generated images would be among the first available photos in the unfolding drama being broadcast globally.

Andy Carvin at National Public Radio (NPR) knows that a cadre of interested social media aficionados can add depth to coverage in ways that media staff alone cannot provide. And during emergencies, a well-established online community means more voices are getting the word out.

During the 2008 presidential election, NPR's Vote Report helped identify voting problems via 10,000 submissions from "average citizens" nationwide. On Inauguration Day, NPR received more than 40,000 submissions of photos, video, text, and Tweets that added depth to its coverage.

Carvin explained that tagging enables specific content to be gathered from various sources.

"You can see what people are all yammering about," he said, showing a search on Twitter for the term "Risk 2.0" to refer to the APHA-hosted roundtable session. "But it becomes a lot more interesting when people start using this in real time when things hit the fan somewhere."

A few days before Hurricane Gustav landed in 2008, Carvin created a website based on tags by pulling together

Tweets, Utterli voice mails, and photos from Flickr and other sites. Almost 500 people signed up via Twitter in the first 48 hours. These people helped create various tools that made it possible to automatically aggregate content from sources all over the Internet.

Perhaps no recent crisis better illustrated the gap between social media users and authorities than the 2007 shootings at Virginia Tech. Although the campus is one of the most "wired" in the nation and has been at the forefront of the adoption of new technology, students were mostly in the dark as harrowing events unfolded.

The university was not able to quickly release the names of the victims because of legal issues, but those names were already posted on Wikipedia.

As university officials struggled to help students, faculty, staff, and community members cope in the aftermath, about 1,000 journalists and crew descended on the Blacksburg, Virginia, campus.

"It really became a very small town overwhelmed," said Chris Clough, the university's communications director at that time.

In what could have caused a technological meltdown at a less-wired university, school personnel transferred 432 Gigabytes (GB) of data on April 16, compared with a normal day's load of 15 GB. After the shootings ceased statements were posted to the web, and "lite" pages allowed the overall message to be changed as needed—a model other schools and agencies often follow during emergencies.





Nationally and globally, people used social media to connect after the incident. On Facebook, 236 groups formed within 24 hours of the shooting, and more than 500 groups with 124,000 individual members sprang up within days, many consisting of students attending other colleges and universities.

Clough said online scams also popped up within hours, and school officials faced a “bake sale dilemma.” People wanted to raise money, but guidelines were needed. Tapping alumni was critically important for this effort.

New Media in the Media and How the Public Reacts

Fox 5 News started using social media tools such as Facebook and Twitter simply for personal branding, according to news anchor Brian Bolter. His early goal was to understand social media tools and figure out how to “own the space for our viewers.”

Bolter learned early that people did not like linked notes because using links to stories that took viewers back to the Fox 5 website was considered “impersonal self-promotion.”

Bolter went on the air to explain Twitter to his audience. When a storm hit the region, instead of staff making phone calls to sheriffs’ offices in remote counties, the station received instant feedback about storm damage via Twitter from its viewers region-wide. Although Tweets might not make for great television, incorporating this social media tool has helped the station build relationships with its viewers. This relationship building not only creates loyal viewers, it helps the station when social media savvy viewers send in feedback and story tips.

“Ironically, the biggest usage we had, in the 9 or 10 months that we’ve used it,” Bolter said about Twitter, “was not a local story and was half a world away in Mumbai. There was little information when the story broke.” The terror attacks happened just after noon eastern standard time and by the 6:00 p.m. broadcast, Bolter’s station was still scrambling for information. But by then, the station already had about 3,000 Twitter followers.

“With all the limited information we were getting, Twitter was firing on all cylinders,” Bolter said. “Flickr was firing on all cylinders. People were talking to each other, and we were able to cherry pick, verify the information, and sort of put it together and give our viewers a much better presentation of what was going on than so many other people in so many other media outlets.”

That’s the type of edge that social media can give public health and emergency management organizations in the crucial first hours of a disaster.

Craig Lefebvre, a research professor at The George Washington University School of Public Health and Health Services, says that he also blogs and Tweets and envisions social media changing people’s expectations of communications and communicators.

“We’re not just talking to people, but they’re talking back to us, and, more importantly, talking to each other,” Lefebvre said.

Goodbye sources, messages, channels, and receivers.
Hello, networks!

It is important to understand, too, that most of the world does not use the Internet to search for information; rather, the world uses the Internet to connect with social networks.

“This is a community that’s forming out there,” Lefebvre said. “It’s no longer about individuals.”

To engage communities in new ways, advocate rather than preach. Instead of thinking of “transmitting” messages, especially during an emergency, allow people to engage and participate. When possible, the style should be informal and conversational and should work to inform and collaborate with the audience—not command and control it. Above all, Lefebvre advises, build a community. And, as we work to refine our communications strategies for times of emergency, do not let that crippling fear of new media or public reaction stand in the way of good messaging.

SURVEY RESULTS: Use of Social Media

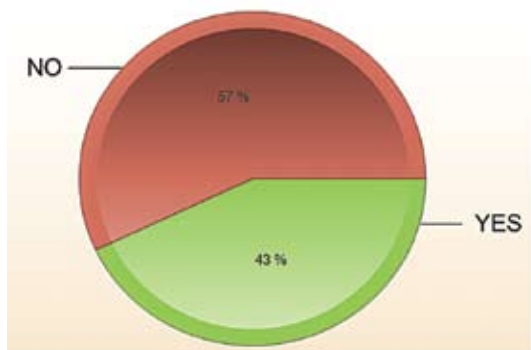
Prior to the March 31 Round Table, the event co-sponsors conducted a web survey to examine the many facets of social media during times of crisis such as types of tools used and their effectiveness, barriers to their use, and coordination of social media with broader communication strategies.

The survey was conducted using a sample of 9,000 participants; of these, 541 individuals and/or organizations responded.

1) Use of Social Media Tools

A slight majority of respondents indicated that they did not use any social media tools for communicating public health issues or emergencies.

Does your organization currently use social media tools (such as blogs, Facebook, Twitter, texting, Wikis, etc.) to communicate about public health issues or emergencies?

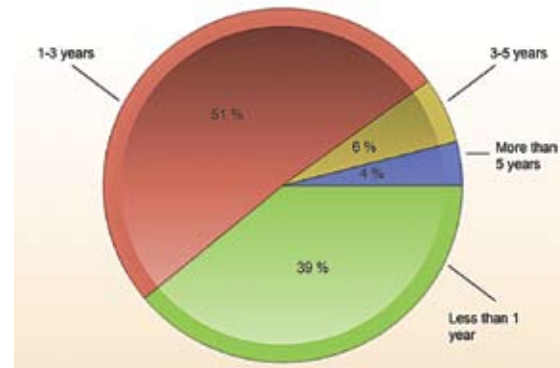


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2) Length of Time Using Social Media Tools

Slightly more than one-third of respondents have used these tools less than 1 year, and more than 75 percent have less than 3 years of experience using them.

How long has your organization been utilizing social media tools?

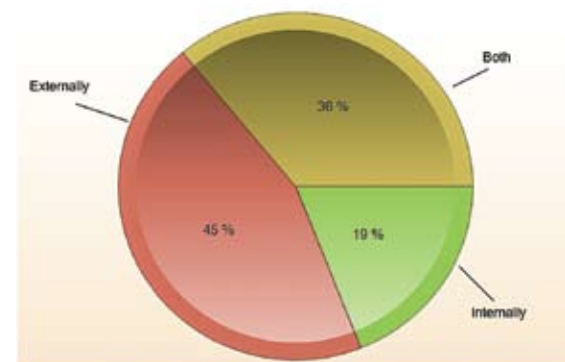


n=231

3) Primary Communications Use of Social Media Tools

When asked how organizations used their social media tools, nearly two-thirds of respondents said that they used them to communicate only externally, or externally and internally. Less than one-third of respondents used social media tools only within their organizations.

My organization primarily uses social media tools to communicate:



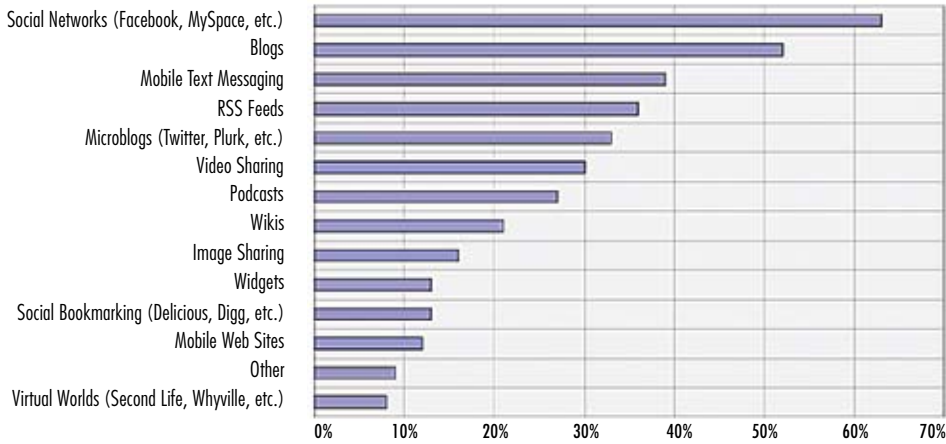
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4) Types of Social Media Tools

Social networking (e.g., Facebook and MySpace) accounts for the largest percentage of tools that survey respondents use, with blogs in a close second place. Respondents use virtual worlds, mobile websites, social bookmarking, widgets, and image sharing less, at under 20 percent.

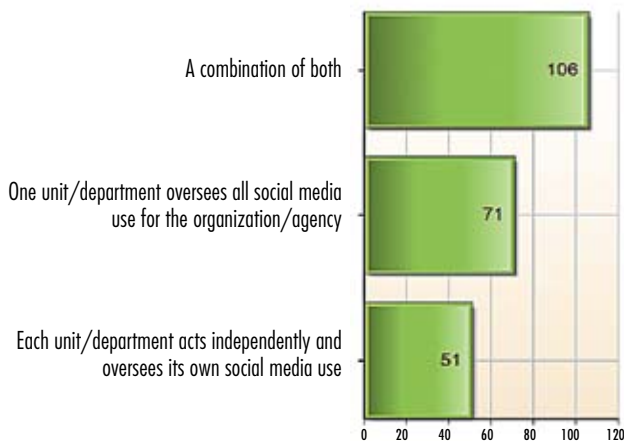
Which of the following social media tools does your organization currently use?



5) Social Media Strategy Coordination

Nearly half of respondents used a combination of one department leading social media coordination for the organization, and departments independently overseeing their own social media use.

Which of the following best describes how your organization coordinates its social media strategy?

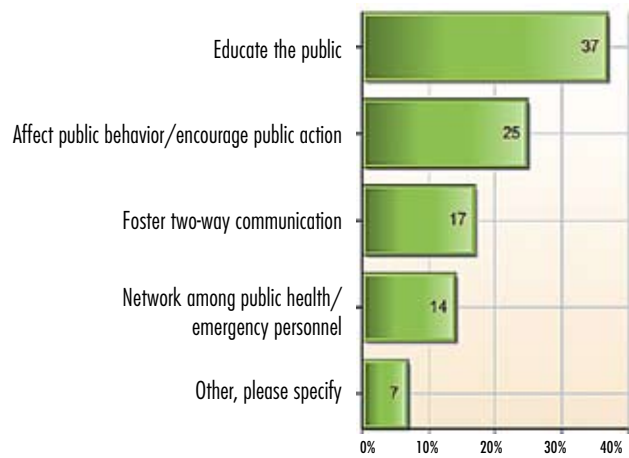


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6) Goals Using Social Media

Respondents placed slightly greater importance on educating the public as a goal for using social media. Affecting public behavior/encouraging public action also garnered a solid response.

Which of the following goals is most important in your use of social media?

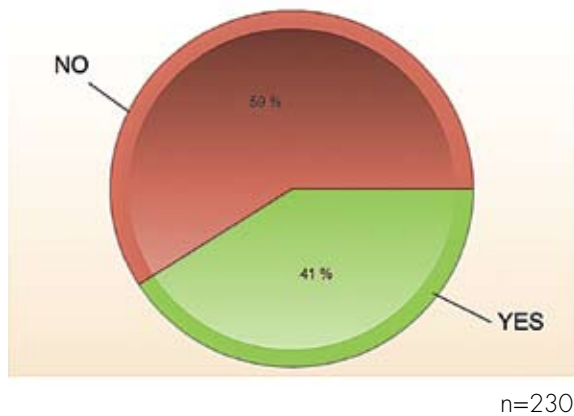


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7) Evaluating Effectiveness

A large majority of survey respondents are not evaluating the effectiveness of their organization's social media use.

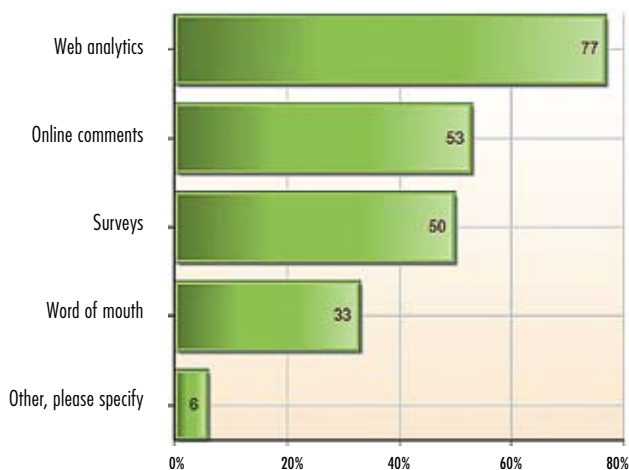
Do you evaluate the effectiveness of your use of social media?



8) Evaluation Tools

When evaluation metrics are used, a large majority of participants used web analytics. Respondents used online comments, surveys, and word of mouth to a lesser degree for evaluation.

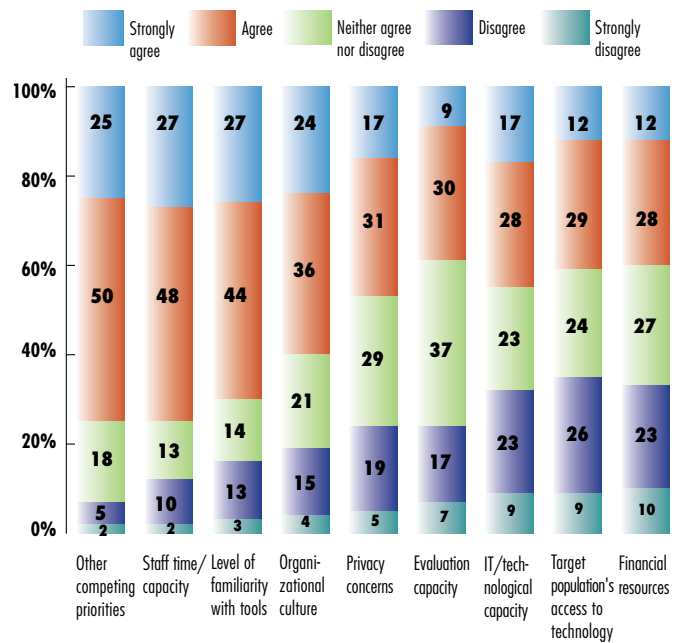
Which of the following evaluation tools do you use?



9) Barriers to Use

With strong majorities, survey participants identified the key obstacles that limit their organization's use of social media. These obstacles include other competing priorities, staff time/capacity, level of familiarity with tools, and organizational culture.

Do you agree or disagree that the following issues present obstacles for your organization in using social media strategies to improve public health or risk/crisis communications?



Key Findings

The web survey reveals that public health and safety professionals can do considerably more to move toward a communications framework that encompasses all effective communication vehicles, including social media.

Key survey findings are as follows:

- No organization can rely on its own website as the sole source of information and forum for discussions about an incident. Nor can organizations assume that they are the sole or primary knowledge producers of expertise.
- Citizens who are far removed from "official channels" of emergency information will create and share their own knowledge; however, they connect their content to a vast, multipliable social network, exacerbating the potential for the propagation of rumors and myths.





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- Social media (e.g., YouTube, Facebook, and Twitter) are popular and influential because they help satisfy the human need to create and connect. It is imperative that emergency communicators not only monitor the information shared across social media, but also engage the dialogue to help shape the conversation.
- Public-private partnerships provide additional opportunities for enhanced communication, whether in training, strategy development, system design and implementation, messaging, or stakeholder engagement.
- While the public has flocked to the Internet and smart phones with access to online content, the emergency community has only begun to catch up. Yet, as the survey data suggests, there is a definite trend toward adoption—and more importantly, toward strategic implementation.
- The prevalent and exclusive use of social media to broadcast information to large audiences fails to tap into the full potential of social media as a tool for outreach and collaboration. As the data suggests, only 14 percent to 17 percent of emergency managers use social media for anything other than a “traditional” one-way broadcasting tool.
- Most organizations do not seem to evaluate their social media engagements. Although software that measures social media efficacy is as newly developed as the media it tries to monitor (e.g., Facebook’s Lexicon graphs the frequency of “words” in status updates and can help media professionals observe public sentiments and perceptions), it is nonetheless worrisome that some type of metric is not being applied throughout the life cycle of a social media campaign.
- Overall, the data is encouraging regarding social media’s role in emergency communications; however, the time is fast approaching when “social” media will simply become “media.”
- The recent H1N1 flu outbreak demonstrated the power of social media to reveal concerns, fears, and ultimately the resolve of people who often want little more than assurance that the information they have (and will ultimately share) is accurate.



SPEAKERS

Ann Aikin works for the Centers for Disease Control and Prevention (CDC) in health marketing on the Interactive Media Team. She leads the new media research activities and works to develop innovative health communications products with other CDC partners. She also acts as the social media lead in emergency communications at CDC, collaborating with partners at the Food and Drug Administration (FDA), Health and Human Services (HHS), and CDC to integrate numerous user-centric and research-based social media tools for the peanut butter and peanut-containing product recalls. Previously, she worked for the National Center for Health Statistics as a health communications specialist and a technical information specialist.

Georges Benjamin, M.D., FACP, FACEP (E), is executive director of the American Public Health Association, the nation's oldest and largest organization of public health professionals. He came to that post from his position as secretary of the Maryland Department of Health and Mental Hygiene, where he played a key role developing Maryland's bioterrorism plan. Trained as an emergency physician, Dr. Benjamin served as chief of emergency medicine at Walter Reed Army Medical Center and later as acting commissioner for public health for the District of Columbia. He is a member of the Institute of Medicine of the National Academies of Science.

Brian Bolter is anchor and reporter with WTTG Fox 5. He is a two-time Emmy award winner, including being honored as the Mid-Atlantic's "Best Live Reporter." He also won a prestigious Edward R. Murrow award for excellence in journalism. From the Pentagon and Ground Zero during the week of September 11 to the wildfires in California and the aftermath of Hurricane Katrina, he has reported on the front lines of events that helped shape our country. Mr. Bolter came to Fox 5 from WBAL-TV in Baltimore, Maryland, where he worked as the weekend anchor and reporter. He started his broadcast journalism career more than a decade ago in Monterey, California.

Andy Carvin is senior strategist for National Public Radio's (NPR) Social Media Desk, where he has helped NPR program staff learn how to integrate user-generated content, crowdsourcing, and social networks to promote dialogue and collaboration with the general public. Before coming to NPR in 2006, Mr. Carvin was director and editor of the Digital Divide Network, an online community of educators, community activists, policy-makers,

and business leaders working to identify solutions to the digital divide. He also is author of the Public Broadcasting Service (PBS) blog "learning.now" (www.pbs.org/learningnow), which focuses on the impact of Internet culture on education. In 2005, *MIT Technology Review* magazine named Mr. Carvin to its list of 35 of the world's leading high-tech innovators under the age of 35.

Christopher Clough is a marketing communications consultant based in the Washington, D.C., area. Most recently, he was the director of marketing and strategic communications at Virginia Polytechnic and State University (Virginia Tech), where he oversaw the successful university-wide branding initiative and the university's trademark and licensing program. Following the shooting tragedy in April 2007, Mr. Clough was a leader in the strategic communications efforts to help heal and position the university for the future. Before his position at Virginia Tech, he had his own consultancy, hosted a local business radio program, and held numerous corporate communications positions.

Michael Dumlao is a senior consultant at Booz Allen Hamilton specializing in creative multimedia design and social media strategy. Bringing more than 8 years of professional experience in visual communications and brand development, Mr. Dumlao has designed websites, print collateral, and social media for clients in the defense, homeland security, and civil markets. Before joining Booz Allen Hamilton, he was creative director and lead designer for The Georgetown University's Center for New Designs in Learning and Scholarship, a research think tank specializing in the convergence of emerging media technology and higher education.

Laura Howe is the senior director of public affairs for the American National Red Cross, where she is a spokesperson and oversees media relations and crisis communications. Ms. Howe also manages all Red Cross social media efforts. Earlier, she worked with the Red Cross Southeast Service Area, where she led the region's communications response to Hurricanes Katrina, Rita, and Wilma. She learned the media trade while spending more than 8 years as a television news reporter and anchor in stations across the south.



Nathan Huebner began his career at the Centers for Disease Control and Prevention (CDC) in 1999 and shifted full time to emergency risk communication as a result of his involvement in the responses to September 11 and the anthrax attacks in 2001. As lead for the CDC Emergency Communication Web Team, Mr. Huebner is responsible for coordinating CDC's use of the Internet to prepare for and respond to public health emergencies, including anthrax, Severe Acute Respiratory Syndrome (SARS), Hurricane Katrina, foodborne outbreaks, and many other emergencies.

Supervisory Special Agent (SSA) Richard J. Kolko is currently assigned to Federal Bureau of Investigation (FBI) headquarters as the unit chief of the National Press Office and as an FBI spokesman. He was assigned previously to the Counterterrorism Division as a supervisor on the Fly Team, which provides a rapid worldwide response to terrorism matters. In 2007, Mr. Kolko served as the ESF-1.5 lead at the Top Officials (TOPOFF) exercise in Portland, Oregon. Before reporting to FBI headquarters, he was assigned to the Atlanta division, where he worked on white collar crime, violent crime, the 1996 Olympics and subsequent Olympic bombing investigation, and domestic and international terrorism. Before joining the Bureau, Mr. Kolko worked at CNN as an Emmy award-winning producer and assignment editor.

R. Craig Lefebvre, Ph.D., is an architect and designer of public health and social change programs. He is a research professor of prevention and community health at The George Washington University School of Public Health and Health Services. His work focuses on social media and mobile technologies in social marketing and public health programs. Most recently, Dr. Lefebvre was the chief maven at Population Services International, where he led its technical teams in capacity-building, HIV, malaria, child survival and clean water programs, reproductive health, and social marketing and its research and metrics functions. He produces and writes the blog "On Social Marketing and Social Change" (socialmarketing.blogs.com).

Grant McLaughlin, a principal with Booz Allen Hamilton, manages professionals in the strategic area of organization change. He has more than 15 years of experience in strategic communications, change management/change communications, marketing, public education and stakeholder outreach, participatory decision-making, strategic management analysis, and implementation. Mr. McLaughlin's most recent experiences have centered on assisting U.S. government organizations in moving

through change as a result of a transformation, modernization, or implementation of a new service offering. He has extensive experience in establishing, fostering, and maintaining partnering relationships among stakeholders with state, local, and federal agencies.

Amanda Ripley is a longtime *Time Magazine* contributor, who has traveled worldwide studying disasters, natural and man-made. Her book, *The Unthinkable: Who Survives When Disaster Strikes—and Why*, is the first mass-market book that explains how the brain works in disasters—and how we can learn to do better. In her book and in her work for *Time* and other magazines, she escorts us into the darkest regions of the human experience, flicks on a flashlight, and searches for signs of life. She chronicled Hurricanes Katrina and Rita from New Orleans, helping *Time* win two *National Magazine* awards. She covered September 11 from Manhattan, the sniper attacks from Washington, D.C., and the catastrophic 2003 European heat wave from Paris. Ms. Ripley now writes about human behavior and homeland security from Washington, D.C.

John Shea joined the Federal Emergency Management Agency's (FEMA) External Affairs Office in 1999 and was initially responsible for FEMA's online radio operations among other early multimedia products. He has been deployed to more than 50 disaster responses and recoveries. Mr. Shea was named public information officer for new media in June 2008 and developed the strategies and standard operating procedures for FEMA's social media/new media efforts to integrate existing and future communications needs that the agency encounters for preparedness, response, recovery, and mitigation messaging.

John Verrico, media spokesman for the U.S. Department of Homeland Security's Science and Technology Directorate, has more than 28 years of experience in public affairs for government agencies. Earlier, Mr. Verrico served with the Naval Facilities Engineering Command, Maryland Department of Environment, Maryland governor's office, and Maryland Department of Natural Resources. He is a retired Navy Master Chief Journalist, a former freelance journalist, and a professional trainer on communications and leadership.

Andrew Wilson works in the U.S. Department of Health and Human Services' (HHS) Web Communications and New Media Division. He is responsible for the management of PandemicFlu.gov and is the lead member of the HHS Center for New Media. Before coming to HHS, Mr. Wilson was the managing editor of the U.S. Department of Agriculture's Cooperative State Research, Education, and Extension Service website.



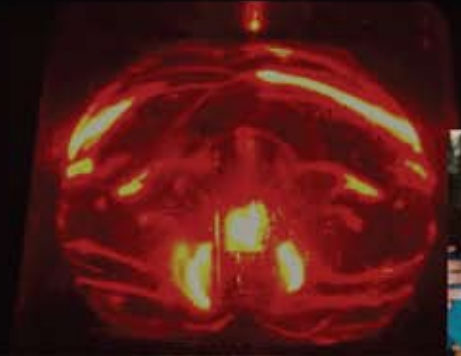
SOCIAL MEDIA PRIMER

What are social media?

Social media are the various electronic tools, technologies, and applications that facilitate interactive communication and content exchange, allowing the user to move back and forth easily between the roles of audience and author. These tools are underscored by a significant cultural shift toward more open, transparent, and collaborative user experiences.

Social Media Tools Include:

Tool	Description
Blogs	Short for weblog, a type of website that is updated frequently; written in a conversational tone and contains regular entries of commentary; descriptions of events or other material
Podcasts	Web-based audio and/or video content made available on the Internet for downloading to a personal audio player
Social Networking Sites (Facebook, MySpace, etc.)	Online communities that allow users to connect, interact, and exchange information with those who share interests and/or activities
Microblogs (Twitter, Plurk, etc.)	Form of blogging that allows users to write brief text updates (usually 140 characters) and to publish them so that their network can view and comment on them
Mobile Text Messaging	Short text messages exchanged between mobile devices
Wikis	Collaborative web page or collection of web pages that allow all users to contribute or modify content
Widgets	Piece of self-contained code (a small application) that can be embedded into a website or program to perform a specific function
Social Bookmarking (Delicious, Digg, etc.)	Sites in which a virtual community exchanges links to content and stores links for future use
RSS Feeds	Short for Real Simple Syndication; a file that contains frequently updated information (such as news headlines or blog posts) that can be subscribed to using programs called feed readers or aggregators
Image/Video Sharing Sites (Flickr, YouTube, etc.)	User-generated sites that allow people to upload pictures or videos and then view and comment on the uploaded content of others
Virtual Worlds (Second Life, Whyville, etc.)	A computer-based, simulated environment in which users interact with each other via avatars, virtual representations of themselves
Internet Forums	Also called message boards; online discussion sites in which users can discuss issues, exchange information, and share views
Mobile Websites	Websites geared for mobile devices



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