



Center for the Study of Traumatic Stress

The Center for the Study of Traumatic Stress (CSTS) is part of the Department of Psychiatry, Uniformed Services University of the Health Sciences

LEADERSHIP COMMUNICATION: *Anticipating and Responding to Stressful Events*

“When people are stressed and upset, they want to know that you care before they care what you know”

— Will Rogers

Background

How leaders behave and communicate during times of risk and crisis (i.e., responding to fears of an infectious outbreak or in the aftermath of a disaster event) can have a significant impact on how people react and respond. It may also influence whether leadership is strengthened or diminished. It is critical to understand that leadership communication, in and of itself, is an intervention.

Principles of Communication

Effective communication is achieved through preparation and awareness of established principles. While the content of information delivered may vary during times of either risk or crisis, several overarching principles should be considered. In addition, how you deliver your message can be as impactful as what you actually say:

- Consider and craft messages beforehand. The advantage goes to those who prepare.
- Do not be afraid to say, “I don’t know.” Commit to finding out and following up at a specified point in time. Even if new information is unavailable, keeping your commitment to communicate builds trust. False reassurance based on inadequate or unavailable facts can quickly undermine confidence and increase anxiety.
- Focus on what people actually want to know in addition to what you want them to know. In a crisis, basic questions include: 1) Am I okay? 2) What about those I love? 3) What should I do? Communication that addresses these questions can be particularly helpful.
- During high stress, people tend to focus on negative messages more than positive. Whenever possible, positive messages should outnumber negative messages 3:1.
- In high stress situations, people process information differently (e.g., reduced attention/concentration, distractibility). Messages need to be short, simple, and

How leaders behave and communicate during times of risk and crisis . . . can have a significant impact on how people react and respond.

repeated. Consider the 27/9/3 template, which limits messages to 27 words, delivered over 9 seconds, carrying 3 messages. While slightly longer messages may be necessary, information should be delivered in a clear and succinct manner.

A valuable tool for crafting

more critical statements is the Compassion, Competence, Optimism (CCO) model for message development: Compassion (statement demonstrating that you care/empathize with the intended audience); Commitment (statement demonstrating commitment to helping/supporting/solving); Optimism (statements indicating a positive view of the future).

- Sequence of information is important. People tend to remember what they heard first, then what they heard last, and finally what they heard in between. Prioritize points/messages with this in mind.

Sample Message

Below is a generic sample message that incorporates several of the principles above:

“This situation is very stressful. We will ensure that resources are available to help with challenges you may be facing. Together, looking out for one another, we will ensure that everyone has the support they need during this very difficult time and that, ultimately, our community is strengthened by this adversity.”

Further Resources

- Covello VT. (2003). Best practices in public health risk and crisis communication. *J Health Commun*; 8(Suppl.1):5–8.
- Vineburgh N, Ursano R, Hamaoka D, Fullerton C. (2008). Public health communication for disaster planning and response. *Int J Public Pol*; 3(5/6): 292–301.
- Substance Abuse and Mental Health Services Administration (SAMHSA). Communicating in a Crisis: Risk Communications Guidance for Public Officials. <http://www.hhs.gov/od/documents/RiskCommunication.pdf>. Published 2002.

