



National Environmental Health Association

Just-in-Time from NEHA Transcript

Title: COVID-19 Clashes, Communication, & Coronavirus

Narrator: Efforts to transition communities through various stages of reopening place environmental health professionals at the intersection of approving and mediating operations at business, education, early childhood education, health care, and recreational facilities.

EH professionals may find themselves in uncharted territory as local, state, and federal agencies have varying and evolving responses to COVID-19. The potential for regulators to be placed in novel and challenging situations requires an adaptive skillset.

What knowledge and skills can help a regulator achieve the *best* possible outcomes when they are asked to mediate potentially tense interactions amid uncertainty, frustration, or fear?

Narrator: Here to talk about this quickly changing landscape and what it will take to navigate it successfully is Dr. David Dyjack, Executive Director of the National Environmental Health Association. Hi, Dr. Dyjack. It is great to have you today.

Dr. David Dyjack: It's great to be with you.

Narrator: We're looking forward to getting some insight about the impact of COVID-19 on the environmental health profession and discussing critical elements of communication.

Narrator: My first question has to do with anecdotal reports that suggest the environmental health profession is being deployed in activities typically outside their traditional scope of work. Is this true? And, what are you learning?

Dr. David Dyjack: I have spent countless hours on the phone over the last several weeks speaking with federal officials, NEHA Regional Vice Presidents, line environmental health supervisors, among others employed in academia, the private sector, and health care. The purpose of the conversations was first to provide support and an unbiased ear for people who needed to vent about COVID— and trust me, there are a lot of them — and secondarily, to maintain situational awareness so we can feed that intelligence to staff at NEHA and decision makers at all levels of government.

It's really interesting. There is one common thread among all the calls: emotions are running high. Environmental health professionals are being asked to do things that they have not necessarily been trained to do. Such as asking large neighborhood parties and gatherings to disperse. To space people in markets. To counsel restaurants on seating arrangements. To explain to business owners why it's in the best interest of everyone that they remain closed, while in some cities — literally across the street — businesses remain open because local or state authorities have employed a more liberal approach to the pandemic and allowed business to remain open or reopen on a more aggressive timeline.

To complicate matters, we are learning that in some places, law enforcement has declined to become involved because of competing priorities. In aggregate, economic hardship coupled with lack of consistency on messages from national and state leadership has created an air of uncertainty across the country and its territories.

One thing I have learned in some 30-plus years in public health is that uncertainty is what upsets people. And to be clear, COVID-19 is one big hot air balloon of uncertainty. The questions with no answers are almost endless. “When will it be safe to send my children back to school?” “Is the day-care safe?” “What happens if my employers request me to return to work?” “What is an essential worker?” “Should I or should I not wear a face mask?” “Can we reuse N-95 respirators?” “Are young people at risk of Coronavirus?” As you can see, these are questions we are struggling with.

To be clear, people – whether Republican or Democrat, male or female, light-skinned or dark-skinned, rich or poor, legal or illegal, fanatically religious or agnostic — all share common values. Primary among those are the health, safety, and the financial security of their loved ones. And as you can see, these values have been thrown into the sea of COVID-19 uncertainty. And into that tempest, environmental health professionals are being tossed, in some cases, wholly unprepared.

Narrator: Yes, and there’s a lot being written about risk communication, particularly during crises, can you tell us what’s new there?

Dr. David Dyjack: Well listen, I think it was musician, Bob Dylan, that once said that it is the song, not the song writer, that’s important. In public health, it is the opposite. There has been a lot written about risk communication— literally thousands of books and articles. I like to quote author Leo Tolstoy: “Everybody wants to the change the world, but nobody wants to change themselves.”

Our profession is being thrown, in many cases, into circumstances for which we are not adequately prepared or trained. So, let us start with ourselves.

First, we should recognize that less than 10% of what people think of you is a function of what comes out of your mouth. Let me repeat that. Less than 10% of what people think of you has to do with what you are saying. All those carefully prepared speeches, power points, lectures, interviews, speaking points, all that stuff, represent a small fraction of what might lead you to success. Alternately – how you modulate your voice, how you dress, your posture, eye contact, and other factors represent over 90% of how your constituency perceives you.

For example, the next time you are in a small group or even in a 1:1 discussion, glance down and look at your shoes. Are your feet and toes in an open “V” shape? Or are they parallel? The people we are talking to subconsciously pick up subtle cues. A “V” shape of your feet signals openness and willingness to listen. Parallel sends a message that you are disinterested, or worse, are looking to exit as soon as possible. That is one example of many. Are your arms crossed? That is a signal of being defensive. Are your hands clasped behind your back? That is signaling superiority. In my opinion, every environmental health professional should complete a Toastmasters program where you learn many of these non-verbal cues.

An important but frequently overlooked aspect of risk communication is dress. And while I am certain to make some enemies with this: we, in environmental and occupational health, are generally pretty awful dressers. I have observed this for over 30 years, and over that time, things

have not dramatically improved. And no, I am not saying we should collectively aim to be on the cover of Vogue or GQ. Let me repeat, I am not saying we should be on Vogue or GQ. And yes, I understand there is government or company-issued clothing that is required in many jurisdictions. However, what I am saying is, we should dress professionally, and to be specific, dress slightly better than the people you anticipate meeting during your course of business. Please, please leave the athletic wear at home. That includes sneakers. Iron your clothing. Remember, we dress out of respect for our communities, particularly when emotionally charged conversations are likely. A poorly or sloppily dressed inspector is less likely to be effective than one who took a few minutes to prep their appearance. In short, people will treat you how dress – another one of those sub-conscious clues.

Narrator: Point taken. So, I'd like to ask you about data. Everyone in public health is talking about the importance of data, yet you seem to be deemphasizing its importance. Can you explain?

Dr. David Dyjack: First, to avoid getting a "pink slip" from the NEHA board of Directors, let me be clear – data is important. Data to an environmental health professional is like premium fuel in a Lamborghini. We need data to make informed decisions. We need data in support of our stories. We need data for empirical and economic arguments. We need data to protect the public's health. It is what we are taught in school.

Having said that, history is replete with examples where data alone has been ineffective in protecting and promoting public health. Let me give you some examples. Vaccine hesitancy. Raw milk. Lead exposure. We have all the data we need on these, and while we have achieved strategic victories in these battles, the war rages on. And I am already seeing Americans marching against a potential COVID-19 vaccine. It's unbelievable. I believe I have made my case. Our profession should familiarize itself with Affect Heuristics – that is – the science of how emotions, and not data, mold and guide our daily decisions. In illustration – the recent run on toilet paper in the U.S. and Australia. That ... made...no...sense... from a factual, data-driven model.

Early in my career, I parsed out my messages and communications to reflect what I called the "COKE" principle. It worked for me and reflected how people perceived me during emotionally charged interactions. COKE stands for Commitment, Openness, Knowledge, and Empathy. I was committed to solving the problem. My body language and statements conveyed I was open to other ideas and explanations. I was knowledgeable, and empathetic. Before I departed for a difficult interaction, I formally went through the process of asking myself if I was prepared to blow life into the COKE principle.

Narrator: That's a helpful practice and a useful acronym, Dr. Dyjack. Before we end, do you have any other thoughts or recommendations that you'd like to share?

Dr. David Dyjack: Sure, I have some broad recommendations, which I would love to unpack some other time.

First, the academic community should consider developing course content on Affect Heuristics, environmental health conflict resolution, and personal communication, including a professional dress code.

Second, for the practice community: if you have some time during this period of isolation and quarantine, avail yourself to online courses on effective personal communications. I am NOT talking about your basic public health risk communication course; I am talking about personal communications.

Where possible, make the case to stay in your in your professional lane during the return to normal phase of COVID-19. That is, if you normally work with restaurants, continue to work with restaurants. But, if you are directed to work with the public in potentially emotionally charged circumstances outside your normal scope of work, please invite law enforcement to join you. If that is not possible or if they decline, consider conducting your work in pairs or a buddy system to optimize safety.

Before heading out into public, develop a heightened sense of self-awareness. Ask yourself: "What do I want from this interaction? How will I be perceived? Am I dressed appropriately? Do I know what message my body language is conveying?" Identify your emotions before, during, and after the interaction with somebody you may be speaking to. Conduct a personal hot wash with yourself and/or your buddy after the interaction occurs. What went well? What did not go so well? What did we learn, through the conversation, that might be used by others in your department or organization?

Listen, the public is frightened and uncertain. On most days, they do not care about your data. They, the public, desire to be seen. They desire to be heard and they desire to be felt. Think about that. They desire to express their humanness.

So, as I close, I encourage you and all of our colleagues in the NEHA network, to be great scientists. To be great regulators. But also, most importantly, be yourself. Be human. When your community feels that you care about them, they will be much more likely to care about what you are trying to accomplish to advance public health.

Narrator: Thanks so much, Dr. Dyjack, It's clear that the country and the profession face the task of adapting in uncertainty, and what you are emphasizing is a critical piece that can help EH professionals stay effective through the challenges presented by COVID-19.

Narrator: For further insight into how to adapt your approach and your message, you will find a wealth of published work, including the following:

[Influence: The Psychology of Persuasion](#)

By Robert B. Cialdini [-chaldini]

[The Political Brain](#)

[The Role of Emotion in Deciding the Fate of the Nation](#)

By Drew Westen

[Thank You for Arguing](#)

By Jay Heinrichs

[The Practice of Adaptive Leadership](#)

[Tools and Tactics for Changing Your Organization and the World](#)

By Ronald A. Heifetz, Marty Linsky, and Alexander Grashow [Gray-show]

Also, check out these online destinations and printable resources for more information to frame your understanding about COVID-19 and hurdles to effective communication:

The NEHA.org COVID-19 web page

At CDC.gov:

The CERC Infectious Disease Communication PDF

The CERC; Psychology of Crisis PFD

And the CERC; Messaging and Audience PDF

At toastmasters.com check out The Toastmasters Book of Body Language

And, the Decision Lab; Affect Heuristic web page

This Just in Time from NEHA regarding COVID-19: Clashes, Communications, & Coronavirus has been brought to you by the National Environmental Health Association. Please visit our website at NEHA.org for more information about our members and our service to the environmental health community.