

2027-04-23 · 80 minutes

Risk communication debate

Your goal: Argue whether public health messaging should emphasize fear or reassurance to change behavior most effectively.

One product: One sentence identifying the main risk of the messaging approach you did NOT argue for.

Question: Which tone can you defend for a specific audience while keeping facts, uncertainty and a usable action honest?

Start the work

A plan links evidence to an action and a measurable check; meeting a target alone does not prove the action caused the outcome.

1. Answer both warmups using a public example or the supplied original example.
2. Read both public-health messages. Identify the action each asks for, choose a position and write two reasons about accuracy and trust.
3. Debate in a group or complete the two supplied solo rounds. Distinguish claims about effectiveness from ethical judgments.
4. Debrief the strongest argument, check its evidence and complete the self-check. Write your reflection on tone and action.
5. Write the required one-sentence exit about the main risk of the approach you did not argue for. Save or submit it through the assigned route.

Without access or a confirmed assignment, save the dated work and mark submission pending. Keep actual board posting, opposite-peer reply and any confirmed official reflection separate.

Words you will use

risk communication

An exchange of information about a possible hazard and ways to respond.

tone

The attitude or emotional emphasis expressed by wording.

fear appeal

A message that emphasizes a threat to motivate a response.

reassurance

Supportive wording intended to reduce worry without hiding known risks.

audience

The specific people a message is designed to reach.

accuracy

Agreement between a claim and the evidence available.

trust

Willingness to rely on a source or message.

credibility

The quality of being believable for supported reasons.

empathy

Recognizing and responding to another person's concerns.

call to action

The part of a message telling the audience what to do.

urgency

The need for timely attention or action.

uncertainty

What is not yet known or established.

effectiveness

How well an action achieves a stated result.

ethics

Reasoning about right action, harms and responsibilities.

harm

A damaging effect on a person or community.

behavior

An action someone performs.

prediction

A statement about a result that has not yet been observed.

evidence

Information used to support a claim.

claim

A statement offered as true or defensible.

reasoning

An explanation connecting evidence to a claim.

counterpoint

A reason supporting a different position.

rebuttal

A reasoned response to an opposing claim.

reflection

An explanation of what changed in your thinking and why.

health literacy

The ability to find, understand and use health information and services.

plain language

Wording that the intended audience can readily understand.

communication channel

The way a message reaches its audience.

hazard

Something with the potential to cause harm.

exposure

Contact with a possible hazard; contact is not a diagnosis.

lead

A toxic metal that can harm health when it enters the body.

IQ

A score from a standardized test of selected cognitive abilities.

nervous system

The brain, spinal cord and nerves that receive and transmit information.

usability

How readily intended users can understand and use a product.

privacy

Control and protection of personal information.

citation

A pointer that lets a reader locate a source.

provenance

Where information came from and how it was created.

measured result

An outcome actually recorded using a stated method.

comparison

Examining similarities and differences under stated conditions.

variable

A feature that can differ or change.

causal claim

A claim that one factor produced a change in another.

stigma

Unfair labeling or judgment that can disadvantage people.

misinformation

Incorrect or misleading information, regardless of intent.

wireframe

A rough layout showing where a product's parts will go.

asynchronous

Completed at different times rather than in a live shared session.

milestone

A defined requirement whose completion needs evidence.

preferred language

The language an audience chooses or uses most comfortably.

H1: the debate and the exact exit

Compare two complete original drafts. They are invented messages for this class. No real campaign, audience response or tested product is supplied.

Your graded exit is one sentence naming the main risk of the approach you did not argue for. Keep your reasons, debate notes and reflection as supporting work.

Also preserve the asynchronous requirement: post a 150-word argument and reply to an actual classmate who chose the other approach, using the teacher-provided board.

For the warmup, recall a public warning. Share no personal health details. Or use this invented label: Read the instructions before using this product.

Answer both starting questions: what feature might prompt someone to act, and how might someone respond to a frightening message with no clear next step?

If you use the supplied label, describe a possible response, not a change that actually happened to you. Personal experience is optional.

Read A1 and B1 aloud or silently and underline the sentence asking the reader to do something. Record your initial choice and the intended audience before debate.

D1: the common facts and audience

The invented Linden community center is designing two alternative lead-information messages for adult caregivers who have little time to read. No real household, child or service is shown.

For this exercise only, an information table has a lead-prevention leaflet and staff who can direct readers to verified local guidance. This setting is invented. It is not a real offer.

CDC describes childhood lead exposure as capable of harming the brain and nervous system and affecting learning. It notes that some effects can persist. [CDC-LEAD]

That general hazard does not establish any child's exposure or outcome. The messages cannot claim every reader is exposed, estimate individual harm, or identify a local source.

No Cleveland rate or test result is supplied. There is no water measurement, response count or comparison test. Water testing alone does not establish a child's lead exposure.

The two drafts use the same audience, basic hazard information and action. Their emphasis differs. Any prediction about trust or behavior must remain a reasoned possibility.

A1: original fear-emphasis draft

Lead can harm a child's developing brain. Take the risk seriously. Some effects can last, but this message cannot tell whether your child was exposed.

Read the lead-prevention leaflet at Linden's information table today, and ask the staff where to find verified local guidance.

This original draft emphasizes the threat to create urgency. The intended emotion is not a measured audience reaction. Analyze its words, accuracy, action and possible burden.

B1: original reassurance-emphasis draft

You can begin with reliable information and a practical next step. Lead can harm a child's developing brain, and some effects can last.

This message cannot tell whether your child was exposed. Read the lead-prevention leaflet at Linden's information table today, and ask the staff where to find verified local guidance.

This original draft emphasizes support and a manageable next step. It does not promise safety or no harm. Analyze its words, accuracy, action and possible loss of urgency.

E1: public communication principles

CDC's CERC guidance emphasizes accurate information, credibility, empathy, action and respect. Its radiation-emergency example also recommends clear language and stating what is known and unknown. [CDC-CERC]

We apply those communication principles here; the radiation example supplies no lead-specific emergency instructions or experiment comparing A1 and B1.

WHO describes risk communication as exchange with affected people, including listening to concerns and beliefs. It stresses trust and honesty about uncertainty. [WHO-RISK]

CDC health-literacy guidance focuses on finding, understanding and using information. It recommends plain language and the audience's preferred language and communication channels. [CDC-LITERACY]

Use these principles to evaluate specific words and the action step. They do not establish that either original draft produces more behavior change.

E2: a fair comparison and two defensible positions

A fear emphasis can be defended for making a serious hazard hard to overlook. A possible risk is distress or feeling pressured, especially if the words imply unmeasured personal danger.

A reassurance emphasis can be defended for making the next step feel manageable while preserving the hazard. A possible risk is that a busy reader underestimates urgency.

These reasons may conflict. They describe possible harms, not reported effects in Linden. Neither stronger fear nor a calmer voice automatically proves better understanding, trust or action.

Both drafts supply an action. A missing action cannot explain their difference. This is not a controlled test of tone or proof of equal access.

Choose one approach. Give two reasons that address accuracy and audience trust, quoting or naming the relevant message wording and one public principle.

Track effectiveness claims separately from ethics claims. "More people will read the leaflet" is a prediction without response data. "Do not imply known exposure" is an accuracy judgment.

A measured comparison would need a defined audience, comparable conditions and a behavior measure. This lesson authorizes no real campaign, experiment or collection of personal information.

Q1: debate, recovery, self-check and reflection

In a group, state your choice and two reasons. Record the opposite claim, its evidence and your reply. During debrief, distinguish a principle-based argument from a measured result.

If a group is unavailable, complete two labeled solo rounds using these supplied positions. They are authored prompts, not quotations from actual classmates.

Solo round A: “I favor A1 because naming serious harm makes the issue harder to dismiss. Its uncertainty sentence avoids saying every reader is exposed.”

Solo round B: “I favor B1 because the action sounds manageable. It states the same hazard without opening with a threat.”

For each round, write a fair summary, one strength, one limitation and a reply from your chosen position. Then write which argument was stronger for this audience and why.

If the debate moved fast, answer the recovery question: did A1 give readers something to do? Quote its action sentence, then return to both reasons and the full exit.

Separate self-check: a flyer says “Lead poisoning can permanently lower your child’s IQ.” It gives no address, phone number or next step. Assess accuracy, usefulness and the behavioral limit.

CDC supports serious and potentially lasting harm, not a prediction for every child. Missing action guidance is a design weakness; these facts do not predict how many readers will act.

Propose one repair that points to verified guidance without inventing a free test or location. A clear action can improve usability without guaranteeing behavior change.

Write a reflection paragraph about how tone, audience and uncertainty will shape your next draft. Revise one warmup idea and name one remaining limitation.

Extension: consider adults receiving an urgent official hazard notice and caregivers waiting for uncertain results. Explain when each real audience type might need urgency or reassurance, conditionally.

Do not invent a specific emergency, diagnosed family or tested audience preference. A calm tone can still convey urgent action; a direct warning can still show empathy.

P1: async and actual coursework status

The asynchronous task requires a 150-word argument for one approach and a reply to a real classmate who chose the other. Draft the post using A1–E2 and your audience reasoning.

When the teacher provides the board, post your own argument, read an actual opposite-position post and reply to its strongest point. Keep the real post and reply status.

Without board access or an available opposite-position post, save the 150-word draft and a labeled reply rehearsal to the opposite Q1 prompt. Genuine posting and peer reply remain pending.

Nothing new in myPLTW today; pick your message audience and use Exit Tickets. No homework is due before this class.

Ask your teacher whether an official risk-communication milestone is assigned and what evidence it requires. Keep any unfinished intervention plan pending; this lesson does not complete it.

Confirm your assigned Disease Detectives A or B work and remaining sections. Ask whether Activity 5.1.2 includes an assigned debate or reflection; its title alone does not tell you which work to submit.

Keep the actual reflection attachment and tracker check pending. First, the teacher must confirm the activity and real completion. Do not fabricate official participation or evidence.

The April 19–23 checklist still includes plan submission and the assigned spreadsheet and intervention evidence. Keep any unfinished work pending alongside today's debate.

Follow the April 23 debate assignment, and ask your teacher if you are unsure which requirements and deadlines apply.

The broader communication unit includes an audience, privacy check, wireframe and usability revision. Preserve those later requirements; an exit sentence does not complete the communication product.

Your next message draft is Monday, April 26, 2027. Choose its audience now; do not assume the draft is due the day after this Friday lesson.

Save the one-sentence exit with supporting notes as one PDF, and match Risk communication debate in the confirmed enrolled BI assignment. Open the linked BI assignment.

The dated folder is Exit Tickets. Without access or a confirmed assignment, save the work and mark submission pending. Preserve teacher identity and filename instructions locally.

This work does not authorize a real campaign or data collection. Do not post publicly, share personal details or claim official completion.

M1: a different appointment-reminder comparison

This entirely invented model concerns adults who already scheduled an information visit. The reminder states an administrative time and place, not clinical advice or an actual appointment.

MA reads: "Do not miss your information visit. It is Tuesday at 2 p.m. in Room 4. Check the date on your reminder card."

MB reads: "Your information visit is ready for you. It is Tuesday at 2 p.m. in Room 4. Check the date on your reminder card."

Both preserve the same appointment facts and action. MA emphasizes avoiding a missed visit; MB offers a welcoming tone. No attendance, comprehension or preference was measured.

Worked position: for adults reviewing a routine reminder, I favor MB. First, its time and location remain explicit, so reassurance does not remove necessary information.

Second, welcoming language fits a routine visit without implying punishment. This applies CDC's respectful communication principle; it does not prove that MB improves attendance.

Counterpoint: MA puts the consequence of missing the visit first. Reply: that emphasis may matter to some readers, but no supplied evidence establishes their response.

Worked exit: the warning approach I did not choose risks sounding punitive to a routine-visit audience, although that reaction has not been measured.

Use this structure for your own A1/B1 argument and the risk of your unchosen approach. Do not substitute the reminder's audience, facts or exit for the lead-message task.

Try the decision

Which approach to this debate is supported?

- Defend either tone for the stated audience using accurate wording, a public principle and a clear limit on unmeasured effects.
- Choose fear because the stronger emotion guarantees the largest behavior change.
- Favor reassurance and claim the audience has no lead risk because no exposure records were supplied.

Explain your choice using the reading. Discuss it or say it to yourself. This practice does not add another submission.

Your 80-minute flow

0–5 minutes	Answer both warmups using a public or supplied original example.
5–20 minutes	Read both messages, identify their actions, choose a position and write two reasons.
20–40 minutes	Debate in a group or complete the two supplied solo rounds.
40–55 minutes	Debrief the strongest argument; check evidence and complete the self-check.
55–70 minutes	Write the reflection, revise a warmup and prepare the async argument.
70–80 minutes	Write the one-sentence opposite-approach risk exit and record genuine status.

Your response record

Use these labels on paper or in your document. The space below also works when this page is printed.

Read and identify actions

Answer both H1 warmups, read A1 and B1, underline each action sentence, and state the D1 audience.

Use the supplied original inputs if no personal example is appropriate. No actual behavior change is claimed.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

Choose and justify

Choose fear or reassurance emphasis for this audience. Write two reasons addressing accuracy and trust, using exact message wording and E1 principles.

Either approach can be defended. A prediction is not a measured result, and both drafts already contain an action.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

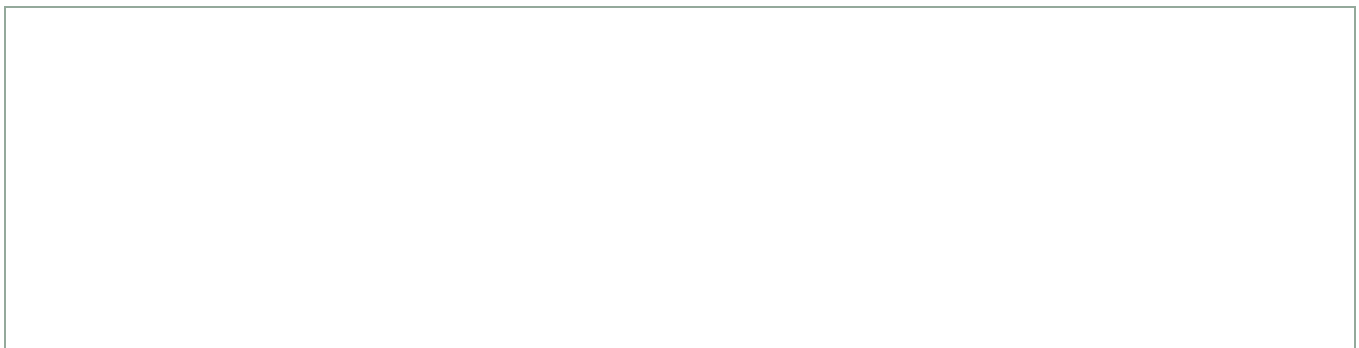


Debate and debrief

Track claims about effectiveness and ethics in actual group debate, or complete both Q1 solo rounds. Record the strongest counterpoint and your reply.

For each solo round, supply summary, strength, limitation and response. Label the mode honestly.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.



Reflect and prepare async

Complete the self-check and reflection paragraph; revise a warmup idea. Draft the required 150-word argument and preserve the actual opposite-peer reply route.

Without the board, rehearse a reply to the opposite Q1 position and mark genuine posting/reply pending. Extension considers both audience types.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

Write the exact exit

Write one sentence identifying the main risk of the approach you did not argue for. Record actual submission, peer, reflection and official status.

Keep the chosen position clear so the exit addresses the opposite approach. Supporting notes do not change the one-sentence exit product.

Use this space or the same labeled section in your existing document. Add paper when your table, graph or drawing needs more room.

Check your product

- Both messages, action sentences and audience are identified.
- Two reasons address accuracy and trust, with an opposing claim and reply.
- Reflection and self-check distinguish possible effects from measured behavior.
- The exit names the main risk of the unchosen approach; async and actual-course status remain honest.

Keep the limit: Original messages and public principles support a reasoned audience-specific choice. They cannot establish actual exposure, behavior change, comparative efficacy, peer participation, submission or official completion.

Turn in your work

Save the one-sentence exit and supporting notes as one PDF. Match Risk communication debate in the confirmed enrolled BI assignment; the dated folder is Exit Tickets.

Without access or a confirmed assignment, save the dated work and mark submission pending. Keep actual board posting, opposite-peer reply and any confirmed official reflection separate.

[Open this assignment in Schoology.](#)

Carry forward

Choose tone with the audience in mind, keep the facts honest, and distinguish a reasoned message choice from measured behavior change.

Carry your audience, tone choice and limits into the message draft on Monday, April 26, 2027; prior plan completion remains separate. How will you turn the chosen tone into a clear, evidence-bounded action?

Sources and resources

[Open today's page](#)

CDC-LEAD · Lead Exposure Symptoms and Complications

CDC

<https://www.cdc.gov/lead-prevention/symptoms-complications/index.html>

CDC-CERC · CERC: Radiation Emergencies, communication principles and text equivalent

CDC

<https://www.cdc.gov/radiation-emergencies/php/communication-resources/cerc-rad.html>

WHO-RISK · Emergencies: Risk communication

WHO

<https://www.who.int/news-room/questions-and-answers/item/emergencies-risk-communication>

CDC-LITERACY · What Is Health Literacy?

CDC

<https://www.cdc.gov/health-literacy/php/about/index.html>