

Comprising or Compromising Credibility? : Use of Spokesperson Quotations in News Releases Issued by Major Health Agencies

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As audiences may increasingly question source credibility during crisis following situations following recent misinforming efforts such as FEMA's staged press conference, the use of spokesperson quotations in press releases deserves greater scrutiny, particularly in the context of relaying health information. This study analyzes use of direct quotations in avian flu press releases issued by leading health agencies to reveal the nature of quotes and use of sources. Findings reveal unique considerations with respect to issuing public directives, communicating unknowns while quelling uncertainty, and balancing use of sources external and internal to the organization, all while preserving spokesperson and organizational credibility.

Introduction

Following failures in its Katrina response, FEMA found itself in a critical position to repair its flailing reputation when handling the California wildfires in 2007. Yet, agency spokesperson Deputy Administrator Harvey Johnson again compromised his credibility and that of the entire agency when it was revealed that he had staged a “press conference,” where employees presented themselves as journalists. Cases such as FEMA's staged press conference in response to the California wildfires illustrate the importance of organizational spokesperson credibility, as skeptical audiences may be applying stricter criteria in their evaluations of sources. Through crisis rhetoric, audiences must be able to identify the trustworthiness and expertise of the source, who is expected to provide relevant information with a clear purpose and means to achieve that goal (Campbell & Huxman, 2003). Yet, public health crises shrouded in unknowns—such as the past SARS epidemic or the possible avian flu pandemic—impose particular challenges to both the *consistency* and *completeness* of the message. Still, publics expect public information officers at health agencies to assuage their uncertainty with not only a promptly delivered but also an accurate and thorough response.

As public health officials brace for the probable avian flu crisis, it is imperative

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for them to use organizational spokespersons to establish publics' trust in those charged with safeguarding them going into the crisis, which will be critical to the power and perceived credibility of their voices during the crisis. Yet, Callison (2001) found that public relations practitioner sources are generally perceived to be less likely to report the truth, dishonest and less trustworthy, and this lack of credibility as well as perceived insufficient resources plague perceptions of government spokespeople. However, little is known as to whether similar perceptions exist regarding public information officers at health agencies. These practitioners may be perceived as more credible because they operate in the primary interest of public health as their shared primary objective and not in the interest of an organizational or client's reputation. On the other hand, audiences may apply even more stringent criteria in evaluating source credibility for those sources who relay information vital to their health and well-being. Either way, the moderating role of source position—specifically, internal or external to the organization—has yet to be identified in the critical context of health crises. These situations are unique from other organizational crises in that public health, not organizational reputation, is the immediate primary objective.

Practitioner voices are most frequently heard in the press releases they issue, in which quotations add interest as well as authenticity to the story, and conveying expert knowledge is a primary function of direct quotations (Kuo, 2007). The crisis of credibility FEMA imposed on itself underscores the importance of using these “expert” sources wisely in press releases, and, given scant scholarly attention in public relations research to the use of direct quotations, the function of quotations is the focus of this study. Although public relations writing texts provide students with basic directives such as “quotations add interest to your news releases”(Bivins, 2005, p. 106), a review¹ of several public relations writing books reveals little beyond guidelines on the mechanics of using direct quotations and attributions. Similar shortcomings are visible in the extant body of literature on use of sources, as public relations scholars have yet to identify how quotations can be used to issue warnings or address organizational uncertainty to prepare audiences for a change in protocol.

To address this dearth, this study content analyzes the use of quotations in press releases issued by four leading health agencies—the CDC, HHS, NIH and WHO—to reveal the nature of quotations and sources. As audiences increasingly question source validity and credibility, we argue these elements of press releases deserve greater scrutiny, particularly in the context of relaying important health crisis information. Although quotes in press releases for print media are the units of investigation in this study, its results apply to the use of quotations in a broad range of new and traditional media. Sleurs, Jacobs and Waes (2003) argue that “the design and functions of quotations in press releases are more complex than has been assumed so

¹ An informal content analysis was conducted on the following public relations writing texts: Treadwell, D. and Treadwell, J. (2004). *Public Relations Writing: Principles in Practice*. Thousand Oaks: Sage. Bivins, T.H. (2005). *Public Relations Writing*. New York: McGraw-Hill. Carstarphen, M.G. and Well, R. (2004). *Writing for PR: A Multimedia Approach*. Boston: Allyn & Bacon. Wilcox, D. and Nolte, L. (1995). *Public Relations Writing and Media Techniques*. New York: HarperCollins.

far” (p. 192) with respect to spokespersons both within and external to the organization, but this complexity has yet to be adequately addressed in public relations research. Ultimately, the use of quotes in press releases may play a critical role in moderating the perceived credibility of not only the source and direct quotations but also the organization’s crisis response.

Review of Relevant Literature

More than 2000 years ago, Aristotle (trans. in 1991) gave us a vocabulary for talking about routes to persuasion and defines rhetoric as “an ability, in each particular case, to see the available means of persuasion” (p. 36). In his classic book *On Rhetoric*, Aristotle identified three basic “pisteis,” or means of persuasion, central to this discussion of sources quotations—ethos, logos and pathos. *Ethos* is based on the character and credibility of the speaker and is contingent on the evaluation of his or her reasoning and trustworthiness. *Logos* is the perceived truth or probability of arguments based on use of logical and rational evidence, and *pathos* refers to the emotional appeals used by the speaker. Prior to a public health crisis, public information officers are charged with informing and preparing audiences to follow certain protocol should a crisis emerge, requiring persuasive strategy perhaps more nuanced than that more simply intended to bolster organizational reputation. Undoubtedly, the crisis rhetor will face many obstacles in route to creating an active and engaged audience who will not succumb to hysteria. As fears of an avian influenza pandemic have continued to mount in the United States since 2004, crisis communicators must call into being a new audience equipped with purpose, efficacy and trust in the health agencies charged with safeguarding it. This audience must be informed, engaged and ready-to-act, and the perceived logos, ethos and pathos of organizational sources and information will be critical to that end.

In pre-, crisis, and post-crisis stages, organizational spokespersons must establish trustworthiness—ethos—and expertise—logos—as the sources of vital public health information while at the same time managing pathos, or the emotions such as uncertainty and assurance intrinsic in a crisis situation. Source credibility, or ethos, as a source factor has attracted the most research, and throughout that research scholars generally agree that competence and trustworthiness are the primary determinants of source credibility (Callison, 2001). Inasmuch audiences trust and rely on those sources of information, they may be more likely to follow the directives the sources provide. Public information officers may rely on quotes from expert sources such as physicians and professors to release pandemic flu information; although the *competence* of these spokespeople is inherent in their rank and perceived experience, research on these sources must reveal how they can earn public *trust*, particularly in a pre-crisis situation full of unknowns.

Several principles present throughout public relations literature govern the use of spokespeople amidst crisis: speak frequently, speak honestly, and only let one speak (Barrett, 2005; Wilcox & Cameron, 2006). Yet, surprisingly there are fewer

directives in public relations literature for how to negotiate the tensions and anxiety surrounding crises while preserving the expert credibility of the sources used by practitioners through the quotes they issue in press releases. Ultimately, given that press releases may be the most frequent and enduring mark of organizations' preparation for and response to a crisis situation, how they use quotations therein may be central to the evaluation of the handling of the crisis. Voices external to the organization may be perceived as more credible than internal sources (Callison, 2001); yet, little is known about how external and internal sources are actually used and how they can work in concert as a powerful forum to issue advice for public safety and well-being. We acknowledge that practitioners often take creative liberty with quotations, as long as the created statement is cleared with its attribution, but that is not of issue here. Instead this paper focuses on the final presentation of those quotes.

This line of inquiry is particularly pressing given that journalists' access to experts for quotations may be difficult amidst the time constraints of crisis, making the quotes practitioners provide even more valuable. Although public may most desire statements issued directly by CEOs and other prominent organizational spokespersons, they may not be as visible during a crisis situation, underscoring the importance of practitioner-subsidized information. Further, as Callison (2001, p. 221) points out, "two factors contribute to the suggestion that public relations are doomed as messengers": one, source credibility and trustworthiness are key to message acceptance, and, two, practitioners are often seen as untrustworthy. Thus, it is even more important to reveal how internal and external source quotes can enhance the perceived trustworthiness and expertise of each other; perhaps the use of external sources in concert with internal sources may bolster the perceived credibility of the internal source. Thus, the following questions are asked in this content analysis of avian flu press releases issued by the CDC, HHS, NIH and WHO:

RQ1a: What percent of releases contained quotes?

RQ1b: How many quotes did the releases contain on average?

RQ2a: Do the quotes more frequently come from sources internal or external to the organization?

RQ2b: Is there difference in the origin of the quotes used in the releases between organizations?

Further, audiences must "come to believe that they can take action, here and now, that can reasonably to be expected to achieve the goal desired" through a clearly identified purpose and means to achieve that goal (Campbell & Huxman, 2003, p. 188). Yet, scholars in public relations have revealed little on how to initiate such calls-to-action through source quotations. Quotations are critical when health officials provide directives in news releases because, unlike the general content of the release, recommendations in the form of direct quotations are issued directly from a perceived

expert or trustworthy source. Thus, they may be a more powerful forum in which to issue advice central to public health and safety. To reveal how warnings are communicated and directives are issued through direct quotations, we ask the following:

RQ3a: Do the quotes issue direct warnings to the public about avian flu?

RQ3b: What, if any, is the relationship between the warnings given in the quotes and relation of the speaker to the organization? (i.e., does someone internal or external address the threat?)

RQ4a: Do the quotes offer assurance to publics about the threat of avian flu?

RQ4b: What, if any, is the relationship between the offering of assurance and the relationship of the speaker to the organization?

RQ5: How much information about the nature of the disease itself is offered in the quotes?

RQ6: Do the quotes issue public directives or calls-to-action?

Message features such as clarity, completeness, volume, accuracy, source ethos, ambiguity, applicability and consistency are keys to reducing uncertainty in receivers of health messages (Babrow, Hines & Kasch, 2000), and these criteria are central to the evaluation of directives and information relayed by organizational spokespeople as audiences are called into action. Analysis of direct quotations as discursive elements in the press releases from major health institutions such as the Centers for Disease Control and Prevention and the National Institutes of Health may reveal *how* and *what kind* of audience is being created, which may provide important directives for practitioners at smaller health agencies. Undoubtedly the crisis rhetor will face many obstacles in route to creating a participatory audience

Through content analysis of these releases we can reveal how health agencies are using direct quotations from spokespersons to communicate uncertainty, a possible change in protocol, and the need for more information about emerging health crises while framing this information in the context of progress and hard work to alleviate public concern. Recent health crises such as SARS, West Nile, bio-terrorism and the threat of avian flu have thrust public health issues into the forefront of public concern. During health emergencies publics expect timely, credible and *accurate* information from public health organizations, and the first 24 hours are the most crucial in the formation of public opinion about the crisis (Mitchell, 1986). Druckmiller (1993) adds that organizations must provide essential facts as soon as they are available so that information is dispersed quickly and accurately. Such rush practically insures that the organization's culture amidst crisis cannot be "business as usual," as the strain of producing a timely response to crisis collapses organizational levels and forces them to

work together, but still speed may be the most critical criterion in evaluating the response of public health information officers.

Such introduces an interesting dilemma for the PIO. On one hand, public uncertainty and speculation mount between event and response time. However, releasing inaccurate information to quell public concern runs the risk of undermining the organization's credibility amidst other even more harmful effects to public health. Thus, crisis response, particularly in public health, faces a constant tension between disseminating accurate information and quickly disseminating information. Both demands impose potential threats to perceived credibility of the source (U.S. Department of Health and Human Services, 2002), which will ultimately affect the organization's reputation. To this end, Barrett (2005) recommends that spokespeople maintain "an organizational willingness to revise publicly stated positions as more accurate information becomes available" and to use "strategic ambiguity as a mechanism to protect organizational credibility" (p. 59). The tension between providing accurate information and providing timely information is clear; to reveal how spokespeople are negotiating that tension, the following research questions are asked:

RQ7a: What is the degree of uncertainty expressed by spokespeople in direct quotations?

RQ7b: Is expressed uncertainty related to the speaker's position inside or outside of the organization?

RQ8 : What, if any, is the relationship among characteristics of the quotes, including warnings/ threats, assuring publics, disease information, calls-to-action, and uncertainty?

The U.S. Department of Health and Human Services (2002) recognizes that "sound and thoughtful risk communication can assist public officials in preventing ineffective, fear-driven, and potentially damaging public response to serious crises such as unusual disease outbreaks and bioterrorism" (p. 3). Furthermore, effective crisis response may foster public trust of and confidence in an organization, which scholars recognize as *vital* in a crisis situation (Covello, Peters, Wojtecki, & Hyde, 2001; Maxwell, 1999). Little is known about how the use of direct quotations—usually a vehicle for relaying expert information—moderates audience understanding and message effectiveness. Callison (2001, p. 231) raises an assumption that, short of other research in the area (that dearth is still evident almost a decade later), "one can assume that organizations and not spokespersons receive the brunt of the negative effects stemming from association with public relations." In the context of public health, this assumption is particularly daunting. If a health agency depends on its practitioners to relay critical information, will lack of trust in practitioners ultimately compromise audience willingness to follow directives of that agency? With this exploratory step toward revealing the nature of sources and information in direct quotes, we lay an important theoretical foundation from which scholars in public

relations can analyze the themes and nature of these quotes in audience studies to answer that pressing question. Thus, we ask:

RQ9a: How often does the release refer to experts?

RQ9b: What, if any, is the relation between quotes and expert references in the release?

Callison (2001) posits the strongest contribution of his research—perhaps the only other done in this area—is a “call for continued investigation of practitioner credibility in the context of actual communication, where perceptions can be gauged following exposure to messages stemming from public relations sources” (p. 232). The use of direct quotations to establish perceived trustworthiness and competence of expert sources is especially critical in pre-crisis stages for public health campaigns, as it is these voices that will direct and safeguard publics during the crisis. This research is an important first step to answer Callison’s (2001) call by investigating the use of sources both internal and external to organization in a pre-crisis health context; the results provide a heuristic benchmark for future audience-centered studies when and if pandemic flu or other health crises occur.

Methods

This study examines press releases distributed by the four leading health agencies—the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS), National Institutes of Health (NIH), and the World Health Organization (WHO). This sample of organizations was chosen because, as the leading national and global health agencies, analysis of their press releases may yield important directives for practitioners at state and local agencies. Analysis of the content of these releases is a necessary first step in order to reveal the effects of their messages on audiences, specifically with regard to how fear and uncertainty are constructed therein.

The CDC and NIH are components of HHS, but the missions of the three health agencies differ and should be noted prior to analysis. The mission of CDC, as stated on its Web site, is “to promote health and quality of life by preventing and controlling disease, injury, and disability” (www.cdc.gov). The NIH states as its mission: “science in pursuit of fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability.” With a more overarching goal, HHS is principal agency of the U.S. government to protect the health of all citizens of the U.S. and to provide services needed to that end. The WHO is a division of the United Nations and is charged with “providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends” (www.who.int). General units of analyses were all copy in the press releases through

the pound mark (#) signaling the end of the release, and direct quotations were coded as statements falling within quotation marks. A coding guide was developed and was pilot tested through three separate waves of testing in the procedure detailed below.

Sample of Releases

Press releases were retrieved from the official Web sites' media archives for each agency (www.cdc.gov; www.hhs.gov; www.nih.gov; www.who.gov). All units of analysis were clearly labeled as a press release. The researchers visited the Web sites periodically over the course of several months both to update the sample and to insure that no releases were overlooked. The final sample of releases ranged over a time span from May 2004 to June 2007. Only releases that directly pertained to pandemic influenza were included in the final sample.

Variables Measured

To answer RQ1, on the frequency of use of quotes, coders indicated for each unit of analysis if the release included a quote and, if so, how many as well as the sponsoring agency of the release. Based on the affiliations given with the sources of the quote, coders indicated if the speaker were internal or external to the agency (RQ2a & b). Research question 3 asks about the nature of the quotes; specifically, did the quote issue a pandemic flu warning? After coding for the presence or absence of such warnings, coders indicated the degree of threat relayed on a three-point scale—little, moderate and severe. The same procedure was followed to code the variables used to answer RQ4; coders indicated if the quote offered direct assurance to publics (eg. little reason to worry, little risk, etc.) and if it offered a low, moderate or strong level of assurance.

Next, coders indicated if the quotes contained information specific to avian flu and, if present, was there a low, medium or high level of information given in the quotes. Anything specific to the nature of the disease itself, with respect to symptoms, transmission, susceptibility, diagnosis, etc., was coded as a unit of information. To capture whether calls-to-action were issued in the quotes, coders indicated if such directives were present, and, if so, the degree to which the call was issued—low, medium or high (RQ6). To reveal whether spokespeople were addressing organizational or their own uncertainties, coders measured any direct mention of uncertainty (or less directly such as “We don’t know everything yet,” “We are trying to learn more but don’t know all,” etc.) according to the degree of uncertainty expressed—little, moderate or severe. Finally, to answer research question 9, coders indicated if the releases referred to cited spokespeople either directly as an “expert” on the topic or indirectly through titles, specifically doctors of medicine or philosophy.

Coding Procedure

Two coders independently coded the sample of press releases. For the first wave of coding to establish inter-coder reliability, a small sample (5%) of the releases was coded following several coding training sessions. Reliability results for this wave were not deemed acceptable, ranging from .69- 1.0 for each variable or construct measured using Holsti's (1969) formula. The coding sheet was revised, and several categories that did not appear to be measuring distinct constructs were collapsed. For the final round of inter-coder reliability checks, 29% ($n= 21$) of the sample of releases was coded. In this wave, reliability was strong across all measures, ranging from .81 to 1.0 for each construct using Holsti's (1969) formula. Having established strong inter-coder reliability, the remaining portion of the sample was coded.

Results

Of the 72 press releases, 11 (15%) were sponsored by the CDC, 17 (24%) were sponsored by HHS, 27 (37%) were sponsored by the NIH, and 17 (24%) were sponsored by the WHO. About 79% ($n=57$) of the releases contained more than one quote. Of the total 122 quotes, CDC-sponsored releases contained 16 quotes (13.1%), HHS-sponsored releases contained 23 quotes (18.9%), NIH-sponsored releases contained 57 (46.7%), and WHO-sponsored releases contained 26 quotes (21.3%). Overall, press releases contained an average of 1.7 quotes, and more than half (52%) of the releases ($n=38$) contained more than 2 quotes (RQs 1a & 1b).

Regarding the origin of quotes (RQ2a), 74.6% ($n=91$) of the 122 quotes came from spokespeople within the organization, whereas only 25.4% ($n=31$) came from sources outside of the organization. Interestingly, the first and second quotes in the releases were most frequently from internal sources (95% of first quotes were from internal sources; 71% of second quotes were from internal sources), whereas the third and fourth quotes used in the releases were more frequently from external sources (64.7% of the third quotes from external sources; 75% of the fourth quotes from external sources). Overall, the majority of the releases used quotes from internal sources first, and external source quotes were added later in the releases.

There were no significant differences between the four organizations with respect to the origin of the quotes used in the releases ($X^2 (3, 122) = 3.60, p > .05$). All four organizations used internal sources of quotes more frequently than external sources. As seen in Table 1, more than 83% of the quotes ($n=47$) that appeared in NIH press releases came from sources inside the organization. Similarly, the majority of the quotes in CDC, HHS and WHO releases came from inside sources (68%, 65%, and 69% respectively; refer to Table 1).

Table 1: *Sponsoring Organization and Origin of Release Quotes*

Organization	The Origin of Quotes		Total Quotes N
	Internal N (%)	External N (%)	
1. CDC	11 (68.8%)	5 (31.3%)	16
2. HHS	15 (66.2%)	8 (34.8%)	23
3. NIH	47(82.5%)	10 (17.5%)	57
4. WHO	18 (69.2%)	8 (30.8%)	26
Total Quotes N (%)	91 (74.6%)	31 (25.4%)	122

Regarding the nature of warnings in the quotes (RQ3a), most of the quotes (80%, $n=98$) did not include a warning or threat about avian flu. Among the quotes that contained a warning or threat about avian flu ($n=24$), 38% came from releases sponsored by NIH, 33% from WHO press releases, 25% from HHS press releases, and only 4% from the CDC. When the quotes addressed the threat of avian flu, 54% ($n=13$) were coded as issuing a high level of threat, 21% a moderate level of threat, and 25% a low level of threat. Regarding the relationship between the nature of the quotes and the relation of the speaker to the organization (RQ3b), 75% ($n=18$) of the quotes that contained avian flu warnings or threats came from internal spokespersons while 25% were from external sources. In addition, about 31% ($n=8$) of WHO news release quotes ($n=26$) issued a threat related to avian flu, whereas only 6.8% ($n=1$) of CDC news release quotes ($n=16$) warned publics of the pandemic threat.

In regard to the research question about how much assurance about pandemic flu was provided to publics through quotes (RQ4a), 43% ($n=52$) of the total sample of quotes offered assurance to publics. Among the quotes with information to assure publics or ease their uncertainty ($n=52$), more than 77% ($n=40$) of the quotes did so at a moderate or high level. Quotes offering assurance to publics about avian flu more frequently came from internal spokespeople than external sources (80.8%, $n=42$, from internal spokespersons; 19.2%, $n=10$, from external sources). Among the quotes with assuring information for publics, 50% came from releases sponsored by the NIH, 19.2% from WHO press releases, 17.3% from HHS press releases, and 13.5% from CDC releases. Within the sponsoring organizations, 43.8% ($n=7$) of CDC news release quotes provided assurance to publics; 39.1% ($n=9$) of HHS release quotes, 45.6% ($n=26$) of NIH news release quotes, and 38.5% ($n=10$) of WHO release quotes assured publics through the information they disseminated. In sum, all four organizations frequently offered assuring information for publics in their quotes.

However, little detailed information about the disease itself was provided in the quotes; only 20.5% (n=25) of the quotes contained information specific to the nature of avian flu, which suggests quotes were not frequently being used to provide disease-related information. In addition, 64% (n=16) of the quotes containing disease-related information came from internal spokespersons, and 36% (n=9) came from external sources. About 68% (n=17) of the quotes with disease information were from the NIH, 16% (n=4) from the WHO, 12 % (n=3) from HHS, and 4% (n=1) from the CDC (See Table 2).

Table 2: *Characteristics of Quotes*

Nature of Quotes	Presence of Indicator N (%)	Origin of Quotes		Presence of Indicator N (%) by organization			
		Internal	External	CDC	HHS	NIH	WHO
1. Warning of Threat	24 (19.7%)	18 (75%)	6 (25%)	1 (4.2%)	6 (25%)	9 (37.5%)	8 (33.3%)
2. Assuring Publics	52 (42.6%)	42 (80.8%)	10 (19.2%)	7 (13.5%)	9 (17.3%)	26 (50%)	10 (19.2%)
3. Information About the Disease	25 (20.5%)	16 (64%)	9 (36%)	1 (4 %)	3 (12%)	17 (68%)	4 (16%)
4. Calls to Action	8 (6.6%)	6 (75%)	2 (25%)	0 (0%)	5 (62.5%)	0 (0%)	3 (37.5%)
5. Uncertainty	33(27%)	28 (84.8%)	5 (15.2%)	5 (15.2%)	4 (12.1%)	19 (57.6%)	5 (15.2%)
Total Quotes N	122	91 (74.6%)	31 (25.4%)	16	23	57	26

In addition, not many quotes in the releases were used for public calls-to-action; only 6.6% (n=8) of the total sample issued such calls in any of the quotes. Among the quotes that did issue calls-to-action, 6 (75%) came from internal spokespeople, and 2 (25%) came from external sources. About 63% (n= 5) of the few quotes with calls or public directives came from HHS-sponsored news releases, and the other 37% (n=3) of the quotes came from WHO releases. The NIH and CDC did not issue any calls-to-action through quotes in their releases.

Regarding the uncertainty level expressed by sources, 27% (n=33) of the quotes contained expressed uncertainty about avian flu whereas 73% (n=89) did not contain any uncertainty expressed by spokespeople. When uncertainty was expressed by spokespeople in the quotes, 24% (n=8) of the quotes were coded as having strong

uncertainty levels expressed by spokespeople, and 36% (n=12) of the quotes contained moderate uncertainty. Among the quotes (n=33) containing uncertainty, 28 (83.9%) came from internal spokespersons, and 5 (16.1%) came from external sources.

There were some strong correlations found among the variables measuring the nature of the quotes. Between the “public assurance” and “expressed uncertainty” contained in the quotes, there was a statistically significant correlation (correlation: -2.64; $p < .01$); there was little uncertainty found in the quotes when assurance was also present. About 87% (n=45) of the quotes that offered assurance to publics did not acknowledge uncertainty. When quotes issued pandemic flu warnings, they were slightly more likely to also contain an acknowledgement of organizational uncertainty, but only 33% (n=8) of the quotes with warnings contained uncertainty and 67% (n=16) did not. In other words, when warning publics about the threat of avian flu, overall there was little uncertainty expressed along with that warning. In addition, when the quotes provided assurance, they were not likely to issue a warning concurrently; about 79% (n=41) of the quotes containing public assurance had no warning.

Lastly, among the total sample of 72 news releases, about 53% (n=38) referred to expert sources to deliver avian flu information, and 48% (n=34) did not (RQ9a). Every release that referenced an expert also included a quote from him or her; in other words, referring to experts always came as direct quotes in our sample of press releases.

Discussion and Applications

Several conclusions drawn from this study indicate a need for more research focused on audience reception of direct quotations in information subsidized by public relations practitioners. Given mounting skepticism and scrutiny of organizational spokespeople in the wake of reputational crises such as FEMA's, public relations research must delve deeper into the management of credibility and uncertainty through direct statements from sources both internal and external to the organization. Amidst health crises, public information officers are often charged with communicating unknowns while maintaining organizational credibility and preparing audiences for a change in protocol. Certainly, statements issued in the form of direct quotations in news releases will be critical to that end. Further, particularly amidst the inevitable rush of a crisis situation, journalists may be more dependent on practitioner-provided quotations, when access to expert sources may be more difficult.

Overall, the sample of releases was comprised fairly equally among sponsoring organizations, with each agency issuing about a quarter of the releases. The releases contained between one and two quotes on average, but more than half of the releases contained more than two quotes. The vast majority of quotes were from spokespeople within the organizations (almost 75%), and the first and second quotes usually came from someone within the organization. The reverse applied to the third and fourth quotes; about three-quarters of those were from external sources. Public relations sources are often perceived as less credible than outside sources, as they may bend

the truth or withhold information to present their clients in a favorable light (Callison & Zillman, 2002). That disparity may fade over time, however, as the source is disassociated from the public relations department (Callison & Zillman, 2002). Taken together with the results of this study, Callison and Zillman's (2002) finding may be troubling in the more *immediate* throws of a crisis situation, given that all four agencies in this study used internal sources more frequently than external ones.

Further, public relations research has yet to identify if similar perceptions plague other sources from within the organization. Specifically, do the same evaluative criteria apply to other sources within the organization without the titles of public relations practitioners? If not, then practitioners may be well-served to rely on internal sources not directly related to a public relations department or function. Common practice in writing press releases is to "create" a quote for approval from its attribution; however, if that voice is used as an expert source in press releases, then, in future situations with less spokesperson control, the media is likely to seek out that person. This presents an undesirable situation for practitioners, particularly given that to enhance credibility while delivering highly technical or difficult information experts should be trained on message delivery (Heath, 1995). Such indicates the complexities inherent in the use of spokespeople and quotes in news releases that deserve more scholarly attention than previously granted. Particularly deeper into the releases, public information officers often relied (in 50% of the sample) on quotes from expert sources external to the organization, such as physicians and professors, to release pandemic flu information. Although the competence of these spokespeople is inherent through their rank, practitioners must also be mindful of importance of trust in establishing source credibility. Perhaps, through associating internal and external sources, an organization that has earned the trust of its publics may supplement that favor with quotes from external spokespersons with inherent expertise and no direct ties to the organization. This contention should be further tested in audience-centered studies. Practitioners may ultimately benefit from that prior association during crisis, when experts may not be readily accessible for quotations and information.

To further reveal the nature of direct quotations issued by spokespeople in press releases, we analyzed the presence and severity of warnings or threats related to avian flu in the quotes. About 80% of the quotes did not issue any direct warnings, but, when they did, more than half of them were coded as having a high threat level. Interestingly, given its mission to "to promote health and quality of life by preventing and controlling disease, injury, and disability," less than 7 percent of CDC releases issued threats related to a possible pandemic. It seems that, as the toll mounts internationally for virus infection and mortality, increased attention to avian flu risk is necessary in direct quotes from credible sources, given that these quotes may carry more impact than warnings given in the general body copy of releases because of their association with issuing experts. When risk or threat of avian flu was communicated in these quotations, the quote usually (75% of the time) came from *internal* spokespersons; yet, given that practitioners may suffer from compromised perceived credibility, threats from external sources such as physicians and scientists in research

laboratories may be taken more seriously. Again, that argument should be further explored in audience-centered studies.

Quotes were most frequently used to make assurances to publics and ameliorate pandemic flu related anxiety, and most quotes (77%) did so at a moderate or high level. The U.S. Department of Health and Human Services (2002) asserts the first goal in crisis communication is to ease public concern and uncertainty by stressing the following messages: the risk is low, the illness is treatable, the illness is not easily contracted, and symptoms are easily recognized. Such assurances are not always warranted in a health crisis situation shrouded in unknowns like avian influenza. However, these quotations were much quicker to assure than to inform or to issue calls-to-action or warnings, which is troubling. Thus, the results of this study suggest that practitioners, when using direct quotes from spokespersons, may want to be more mindful of the balance between warning and assuring. At this point, there may be low perceived immediate risk of avian flu, but, at the same time, public information officers should not make assurances at the expense of preparing, even warning, audiences about the threat of pandemic. If there is indeed a pandemic, publics must be ready to act, aware of the gravity and magnitude of the situation, and armed with purpose and means to act (Campbell & Huxman, 2003). The risk/assurance balance in press releases warrants further investigation, as public relations scholars have revealed little on how to initiate such calls-to-action through source quotations. Perhaps this balance may best be attained by using body content for communicating risk while using quotes to counter that risk with assurance. Experts with strong perceived credibility may well be a more important source of pre-crisis warnings, however, as their recommendations may be received with more gravity.

Only about one-fifth of the quotes provided information about avian flu, and, when they did, the majority of the purveyors of that information were internal sources. Practitioners may garner public trust as they enhance their reputations and those of their organizations; however, to build the other critical dimension of credibility, competence, they may be well served to consider relaying information about the disease or relevant crisis that establishes their expertise in and command of the situation. Thus another careful balance seems to present itself, in that practitioners should not neglect using quotes from experts to release important health information but instead use them as a supplement to their own disease-relevant information. Perhaps most alarming, only 6% of the sample of quotes in the releases issued a call-to-action for publics. The NIH and CDC did not include any quotes with directives for publics. Audiences must be equipped and empowered during the pre-crisis stage to establish protocol for how to respond and act should the crisis emerge, and public relations scholars have revealed little on how to initiate such calls-to-action through source quotations. Unlike more general content, a call-to-action in quotes can be made from a perceived expert or trustworthy source and therefore may be a powerful forum to issue advice for public safety and well-being. Such public directives were a critical element missing from these releases.

Further, despite the importance of preparing audiences for a change in protocol and addressing organizational uncertainty amidst health crises (Barrett, 2005), only about a quarter of the quotes acknowledged uncertainty about pandemic flu. Researchers are scrambling to learn everything they can about the transmission and nature of avian flu to prepare vaccines, but there are still many unknowns surrounding pandemic flu. Spokespersons should be advised to acknowledge and address lingering uncertainties. This directive is critical for two reasons: first, they may be able to preserve credibility should they have to issue a change in protocol or revise earlier statements, and, second and more importantly, they will better safeguard and prepare publics by keeping them aware of the need for more information. In this sample, spokespersons were much quicker to assure than to express uncertainty; this reassurance may be realistic but also dangerous if an outbreak occurs, as publics must be only cautiously assured.

Furthermore, given the demand for immediacy in crisis response, acknowledging uncertainty prepares audiences that there is still more to be learned about the situation as it unfolds. This consideration should manifest more frequently in quotations from spokespeople in news releases. As message clarity, completeness, volume, accuracy, source ethos, ambiguity, applicability and consistency are all central to reducing uncertainty in receivers of health messages (Babrow, Hines, & Kasch, 2000), practitioners can't afford to compromise their credibility or perceived quality of any of these attributes by neglecting their own uncertainties. There was a significant, negative relationship between assurance and uncertainty in quotes in the releases; quotes that issued assurance rarely acknowledged uncertainty. Such is a disturbing indicator that public information officers at these major health agencies may be neglecting an important balance between threat and assurance. Likewise, when quotes were used to issue a warning there was rare acknowledgement of uncertainty or assurance.

The results of this study reveal critical directions for future research in public relations, particularly examination of audience reception and moderators of credibility of quotations in news releases. This study takes a necessary initial step to that end, given that examination of media content is essential prior to revealing media effects. This analysis of the components that may comprise—or compromise—the credibility of both quoted sources and the organization, including uncertainty, expertise and directives, provides a necessary foundation from which that future research can build. Although this paper focused on releases distributed by practitioners at larger federal agencies, its results are applicable to the construction of press releases at smaller health departments and hospitals as well as practitioners working in other areas. Results indicate that audiences may not be equipped with important directives issued through calls-to-action in direct quotations. Furthermore, several tensions are addressed that justify future research to inform how practitioners can best navigate them: between audience assurance and uncertainty, between use of external and internal sources, and between establishment of perceived competence and trustworthiness while at the same time acknowledging all is not known. To be sure, it

is not just what these quotations say but who says it and how it is said; the content analysis of avian flu press releases enables scholars to examine those variables and move forward into more audience-centered studies. In a period of spokesperson scrutiny where credibility seems to be compromised more than comprised, analysis of the direct quotations they offer is pressing.

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