



# Approach and evaluation of the radon communication plan in Belgium





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# Objectives

- Increase the (public) awareness
  - Convince the stake-holders of the benefit of taking action
    - Inform the stake-holders
    - Increase the knowledge
    - Guide the stake-holders to the right information
    - Changes in the behavior of the stake-holders
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## Stake-holders

- Population
  - General
  - In radon prone areas
- Building professionals
  - Architects
  - Building contractors
  - Radon mitigators (and measurement firms)
- Workplace responsible (protection at work, federations)
- Medical professionals
- Authorities
  - Local administration (solicitors, dept. of land use, housing,...)
  - Regional and provincial authorities
  - IAQ dept./agencies
- Academics





# Communication Support

- Radon Web site
  - Brochures
    - General (triplet)
    - Detailed (12 p.)
    - Remediation (20p.)
    - Prevention (10 p.)
    - Medical doctors (6 p.)
  - Fact-sheets for different users
    - Workplaces
      - Schools
      - Underground
      - Waterworks
      - Enterprises
    - Local authorities
    - Building professionals
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# Communication Channels

- Radon Web site
  - Articles and press releases
    - Local, regional and national press
    - Magazines (architects, medical, consumers, ...)
  - Road shows
  - Building fairs (Low energy building)
  - Round table discussions
  - Radon Month (15 october – 15 november)
    - Dedicated website, press conference, call-center
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# Partners and collaboration

- Health prevention workers
  - Federal Employment department (workplaces)
  - Federal health department
  - Regional health/employment departments
  - Provincial departments (health)
  - Municipal departments (housing/health)
- Building research institute (CSTC-WTCB)
- Building Confederation (CCW-VCB)



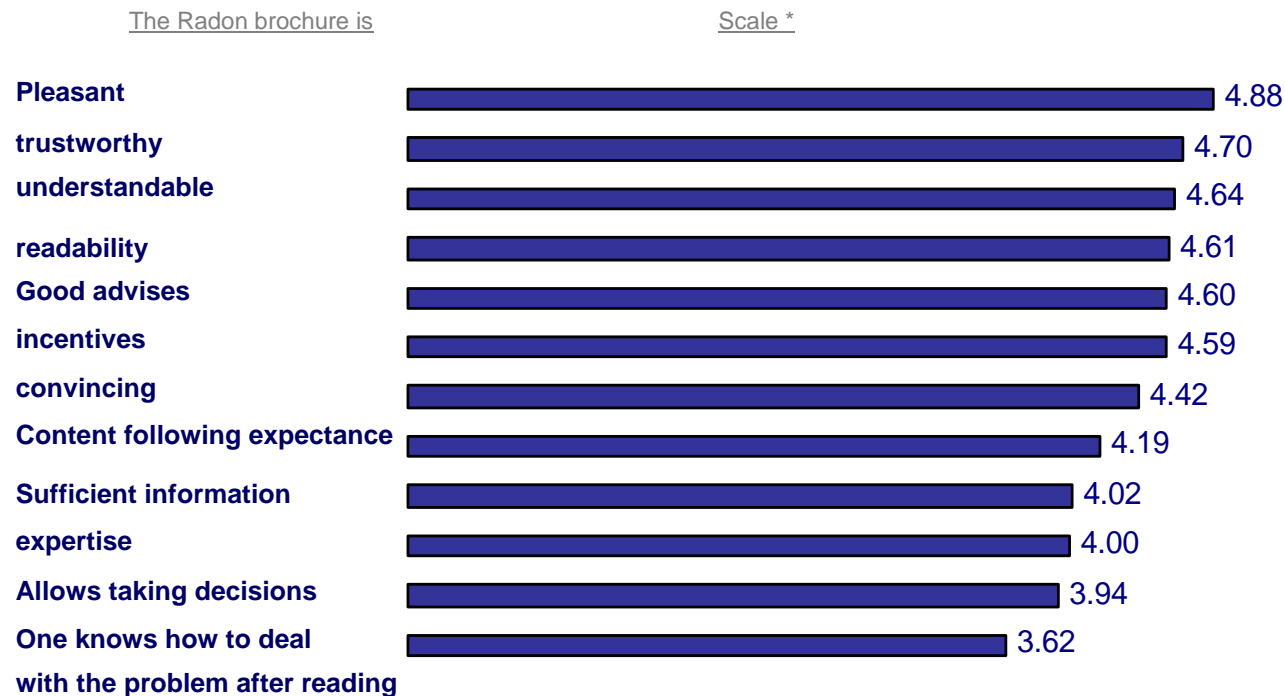
# Evaluation

Efficiency of the communication is evaluated through surveys:

1. Assessment of brochures
  2. Satisfaction of the medical doctors
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# Evaluation of the brochures

- 57 people sampled from ordinary population who received the brochures have been contacted by telephone for a short survey (10 questions)



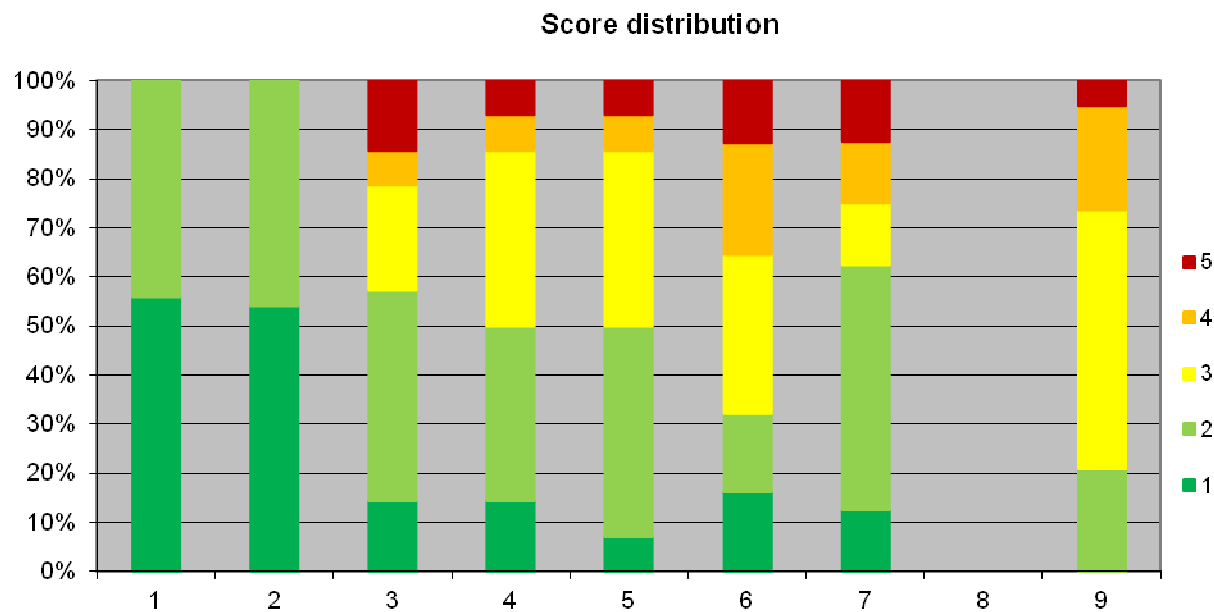
\* scale between 1 (not at all) and 5 (completely)



<b>STRONG</b>	<b>WEAK</b>	<b>OPPORTUNITIES</b>
Layout Invites to read Understandable Trustworthy and clear Invites for action	Too theoretical Not enough technical details Radon risk is not well known (ind.)	More technical and practical info Refer to the technical web-sites and brochures

# Evaluation of the campaign through medical doctors (GP)

- A sample of 50 GP's (out of 6000) have been solicited by telephone for a short survey (8 questions)



# ● Evaluation of the campaign through medical doctors (GP)

- More than half of the GP have heard from the campaign and remember having received the info
- The GP's that have used the documentation were positive about the content
- The applied methodology (reach the public through GP's) has been negatively evaluated
- The most common remarks to the campaign were:
  - Radon risk is not conceived as an important health risk by many GP. The focus is on tobacco
  - Many GP consider radon only of importance in the highly exposed radon-prone areas
  - Many GP's feel drowned in the information/brochures/posters they receive
  - Several GP's suggested other ways for radon awareness activities, such as conferences for GP's, GP federations, medical journals.

## Conclusions

- Usefulness of the communication plan and its evaluation
- Stakeholders involvement is crucial
- Surveys can help a lot, but are time-consuming
- European Radon Association is a next step towards a common approach  
European Radon Month ?