What is risk? (report)

Title: Risk and understanding through expert knowledge and lay dispute

Introduction This report will look at how modern society is a risk society, how expert knowledge is used to understand risk and how lay people respond. Case studies will be used to show how expert knowledge on understanding and managing risk is communicated.

These will show how the lay person disputes risks and make decisions without following the expert knowledge. The work of sociologists of Geoffrey Rose (1850) and Charlie Davison and colleagues (1991) is used to show how the lay person disputes expert knowledge by using their own everyday knowledge and experience. What is risk? 2. 1 Material world and risk In modern society we live in a material world that now provides us with material goods which previous societies didn’t have. However these new material goods can bring us benefits but also can bring us risks.

Putting yourself, or something, at risk is putting yourself in a possible situation which would have a negative outcome. Thompson et al. did a study in 1989 on cyclists who wanted to try to manage the risk of a head injury by wearing a helmet while cycling. The results showed an 85% decrease in the risk of a head injury if a helmet was worn. However, research by Walker (2006) concluded that if a car was to overtake a cyclist wearing a helmet, they would drive closer. Using this expert knowledge some people may chose to not wear a helmet to keep divers at bay even though with a crash

the risk of a head injury would be higher. . 2Case study: allotment In 2003 Tim Jordan and hisfamilyhad an allotment in Hackney in which they thought the soil was safe. Eighteen months after getting the allotment their local authority, sent them a letter telling them the soil was poisoned with arsenic and lead. The test used by the council measured the total amount of poison in the soil using soil plugs. These samples were sent to a laboratory where the level of poison was compared to ‘ soil guidance values’ (Exploring Social Lives, 2009 p. 54). This was a well established tests scientists used to develop their expert knowledge about soil and poisons.

The soil was then tested in a different way with a PBET (physiologically based extraction test). The basis of this test was to measure the level of poison in the soil that would enter the human body. The test tries to create a situation of the soil passing through the human digestive system of a two year old. This test showed that the level of poison in the soil was less then the earlier test. Both tests gave the public information about the level of poison and therefore the level of risk in gardening on that soil. But each test gave the lay person different information making it difficult for them to be certain about the risk.

This case study shows that expert knowledge if not always consistent. 2. 3 Case study 2: sun exposure The sun exposure case study concentrates on Glaswegians attitude towards sun exposure whilst knowing the risks. Simon Carter conducts research on the attitude towards sun exposure drawn from interviews and focus groups of tourists between ages 20 - 35 who regularly travel abroad. This research found that those involved were aware ofhealthadvice on how to protect themselves from the dangers of sun

exposure and why. Glaswegians find going on holiday without a pre-holiday tan as embarrassing.

The Glaswegian term ‘ peely-wally’ is used to describe people who are pale ‘ When you’re away and the sunglasses and white legs come out I’m ashamed to be Scottish ... it’s like if you see a group of peely-wally people then they are Scottish. ’ (Exploring Social Lives, 2009 p. 75) Even though these people knew about the risks of sun exposure they decided not to follow the advise to decrease the risk of damaging themselves due to the idea of looking healthy with a tan. This is an example of expert knowledge being disputed by the lay public because getting brown and having a tan was more important than the risk of illness in the future. . 4 Risk Society and Ulrich Beck In 1986 reactor number four of the Chernobyl nuclear power complex exploded and released radiation causing 28 deaths and left 200 people sick with radiation (Spivak 1992). As radioactive material is invisible to the human eye, it was a challenge for humans to know exactly where had been affected. This meant the public who lived in the ‘ fallout’ zone to the radiation became reliant on the expert knowledge of the risk they were faced, ‘ open to a social process of definition’ (Beck, 1989, p. 88). Beck defined ‘ risk society’ (Exploring Social Lives, 2009, p. 0) to describe the social impact of risk and showed how the complex risks in society needed expert knowledge to explain them. Understanding and knowledge of risk 3. 1 Epidemiology Epidemiology is a way of understanding how illness and disease is transferred across populations by tracing how the infections move across countries. Epidemiology has also been used in understanding risk when experts have used data to work out the probability (chance) of a risk

happening. Doll and Hill (1950) showed that a high percentage of people who smoked had lung cancer and so they argued thatsmokingwas a risk.

This expert knowledge is based on understanding a pattern rather than the cause of lung cancer. 3. 2 Geoffrey Rose (1850) Epidemiological research is always carried out on a whole group of people but when the risks are communicated they are aimed at the individual. Prevention paradox was defined by Geoffrey Rose (1850). It describes the situation where the solution to prevent a risk will offer the community benefit that may not apply to each individual. Rose describes it best by saying that the ‘ measure that brings large benefits to the community offers little to each participating individual’ (Rose, 1891, p. 850). Rose uses vaccinations to describe prevention paradox. Not every child will suffer from the illnesses prevented by vaccinations however every child will have a vaccination in order to prevent the one child that would need it. ‘ 599 “ wasted” immunisations for the one that was effective’ (Rose, 1981, p. 1850). 3. 3 Lay dispute of risk Davison et al. found that people in every day life talked about health and illness. They knew people who had followed all the health advice and still became sick and died and other people who had not followed any of the advice and had no negative effects.

This results in a type of lay epidemiology through which people dispute the expert knowledge and reinforce the experience of individuals in their everyday life. 4. Conclusion As society has become more complex and the public have more choices of consumer goods and services that there are risk as well as benefits in these. Many of these risks are complicated to understand and so need experts to study and explain them. This has led to

the risk society where expert knowledge is used to help the lay public understand the risks facing them everyday.

There is evidence that the lay public disputes the expert knowledge and makes decisions not to follow advice, such as using sun protection. This is partly because expert knowledge can be contradictory with different studies showing different risks but also because the expert knowledge does not always match the individuals experience. 1295 Words Beck, U. (1989) ‘ On the way to the industrial risk-society? Outline of an argument’, Thesis Eleven, vol. 23, pp. 86-103 Bromley, S. Clarke, J. Hinchliffe, S. Taylor, S (2009) ‘ Exploring Social Lives’ Carter, S. and Jordan, T. Chapter 2 Living with risk and risky living’, Open University, Milton Keynes. Carter, S. (1997) ‘ Who wants to be a “ peelie wally’’? Glaswegian tourists’ attitudes to sun tans and sun exposure’ in Clift, S. and Grabowski, P. (eds) Tourism and Health: Risks, Responses and Research, London, Pinter. Rose, G. (1981) ‘ Strategy of prevention: lessons from cardiovascular disease’, British Medical Journal, vol. 282, pp. 1847-53 Walker, I. (2006) ‘ Drivers overtaking bicyclists’ [online], http://drainwalker. com/overtaking/overtakingprobrief. pdf (Accessed 14 April 2009)