

*What do I fear, what can I control?*

Seda Erdem & Dan Rigby  
University of Manchester

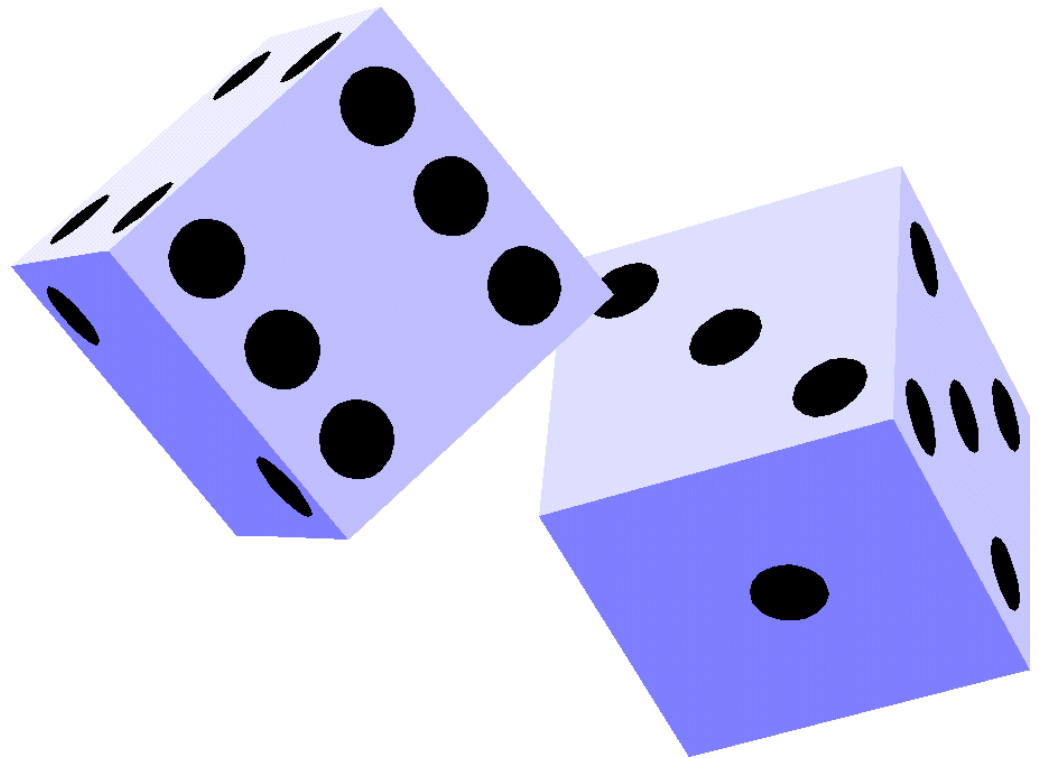
O157 one of many risks

# O157 one of many risks



# Contextualising Risk

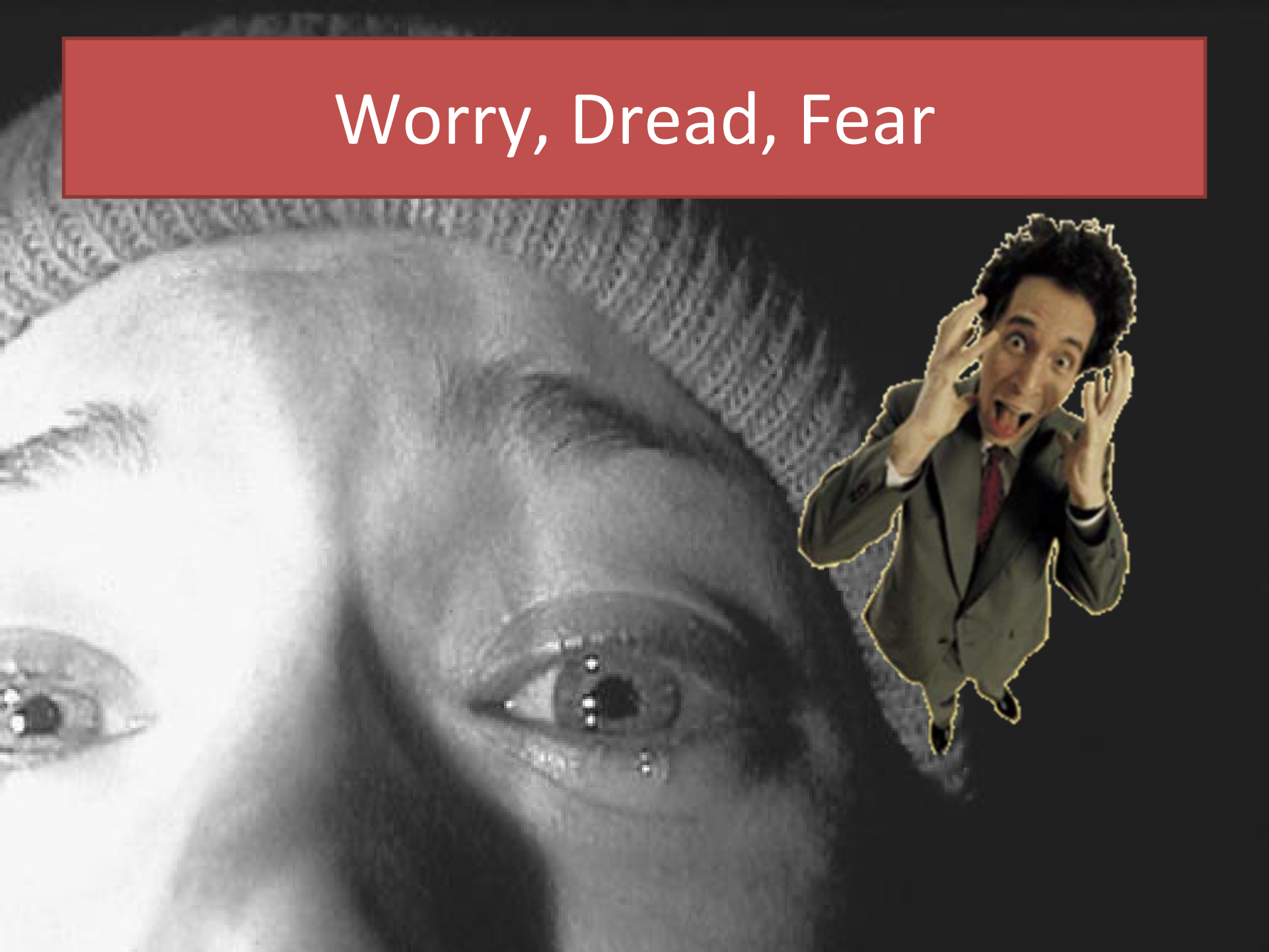
How do people perceive and locate the risk of interest?



# Control



# Worry, Dread, Fear



**Low Control  
High Worry**

**High Worry  
High Control**

**Worry**

**Control**



**Low Control  
Low Worry**

**High Control  
Low Worry**



## How much control do you have over events?

Please indicate:

- the event you think you would have the **most** control over (i.e. the most control over preventing the event happening)
- the event you think you would have the **least** control over (i.e. the least control over preventing the event happening)

<b>Most control</b>		<b>Least control</b>
<input type="radio"/>	Getting avian flu (bird flu)	<input type="radio"/>
<input type="radio"/>	A fire at my home	<input type="radio"/>
<input type="radio"/>	Eating food containing pesticide residues	<input type="radio"/>
<input type="radio"/>	Getting ill from E. coli	<input type="radio"/>
<input type="radio"/>	Becoming depressed	<input type="radio"/>



Please look at the sets of events below.

For each set please indicate:

- the event you think you would have the **most** control over (i.e. the most control over preventing the event happening)
- the event you think you would have the **least** control over (i.e. the least control over preventing the event happening)

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control

	Most control over		Least control over
<input type="radio"/>		Being run over	<input type="radio"/>
<input type="radio"/>		Eating foods containing hormones	<input type="radio"/>
<input type="radio"/>		Getting swine flu	<input type="radio"/>
<input type="radio"/>		A fire at my home	<input type="radio"/>
<input type="radio"/>		The health effects of using mobile phones	<input type="radio"/>

# Best-Worst Scaling

- Make choices only at the extreme
- Bite size tasks
- A full scaled ranking, fast & with reduced pain

## What causes you the least and most worry?

Please consider the set of events shown below

Please indicate:

- the event that worries you **most**
- the event that worries you **least**

Most worrying		Least worrying
<input type="radio"/>	Getting avian flu (bird flu)	<input type="radio"/>
<input type="radio"/>	Being burgled	<input type="radio"/>
<input type="radio"/>	Eating food containing pesticide residues	<input type="radio"/>
<input type="radio"/>	Getting ill from E. coli	<input type="radio"/>
<input type="radio"/>	Getting a food allergy	<input type="radio"/>

**Low Control  
High Worry**

**High Worry  
High Control**

**Worry**

**Control**



**Low Control  
Low Worry**

**High Control  
Low Worry**



Low Control  
High Worry

High Worry  
High Control

Worry

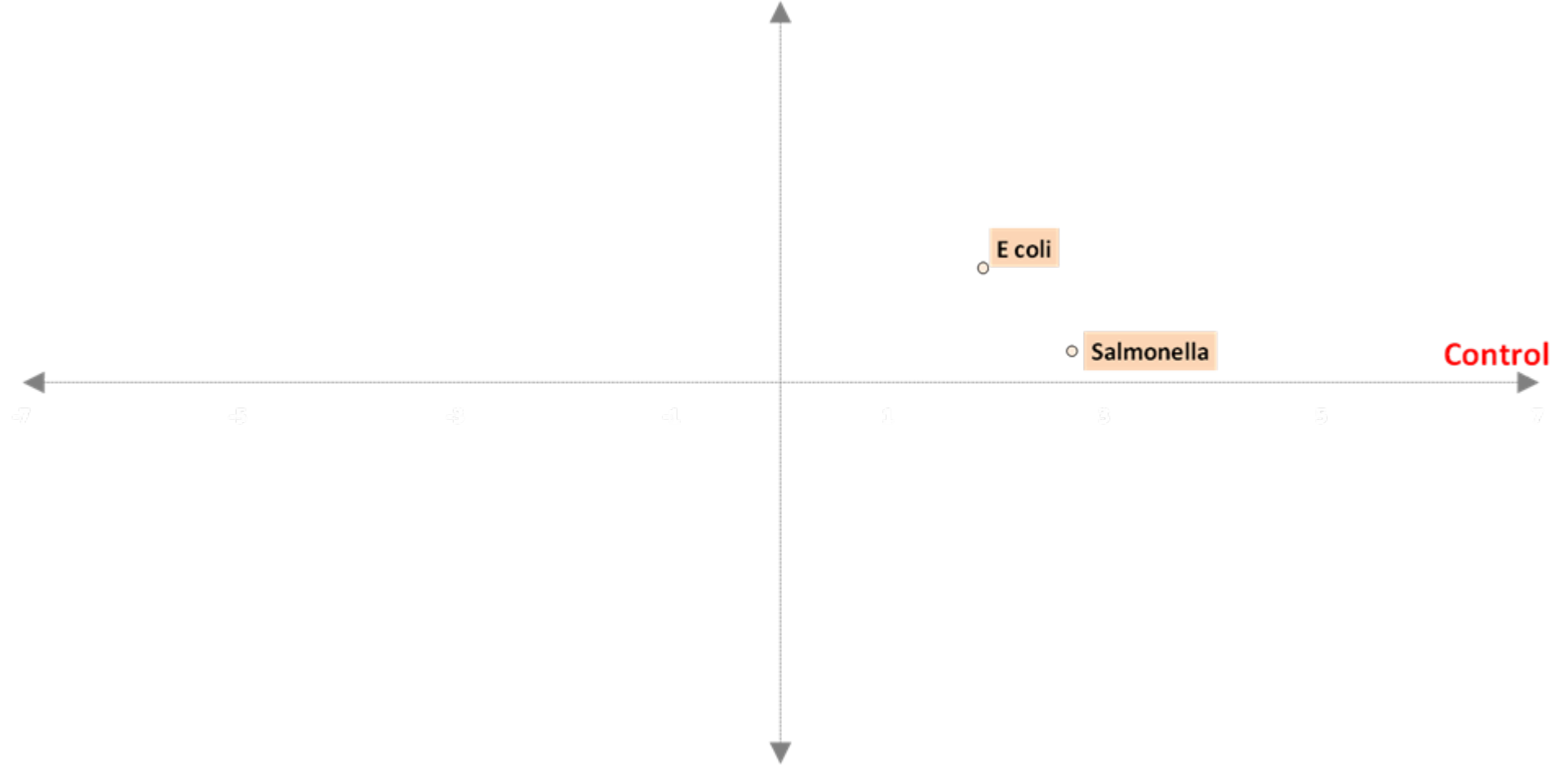
Control

E coli

Salmonella

Low Control  
Low Worry

High Control  
Low Worry



-7 -5 -3 -1 1 3 5 7

Low Control  
High Worry

High Worry  
High Control

Worry

Control



Pesticides

Hormones

E coli

Salmonella

BSE

Allergy

Additives

Low Control  
Low Worry

High Control  
Low Worry



Low Control  
High Worry

High Worry  
High Control

Worry

Control



Swine Flu

Bird Flu

Allergy

Cloned

BSE

Pesticides

Hormones

E coli

Salmonella

GM

Additives

Low Control  
Low Worry

High Control  
Low Worry

Low Control  
High Worry

High Worry  
High Control

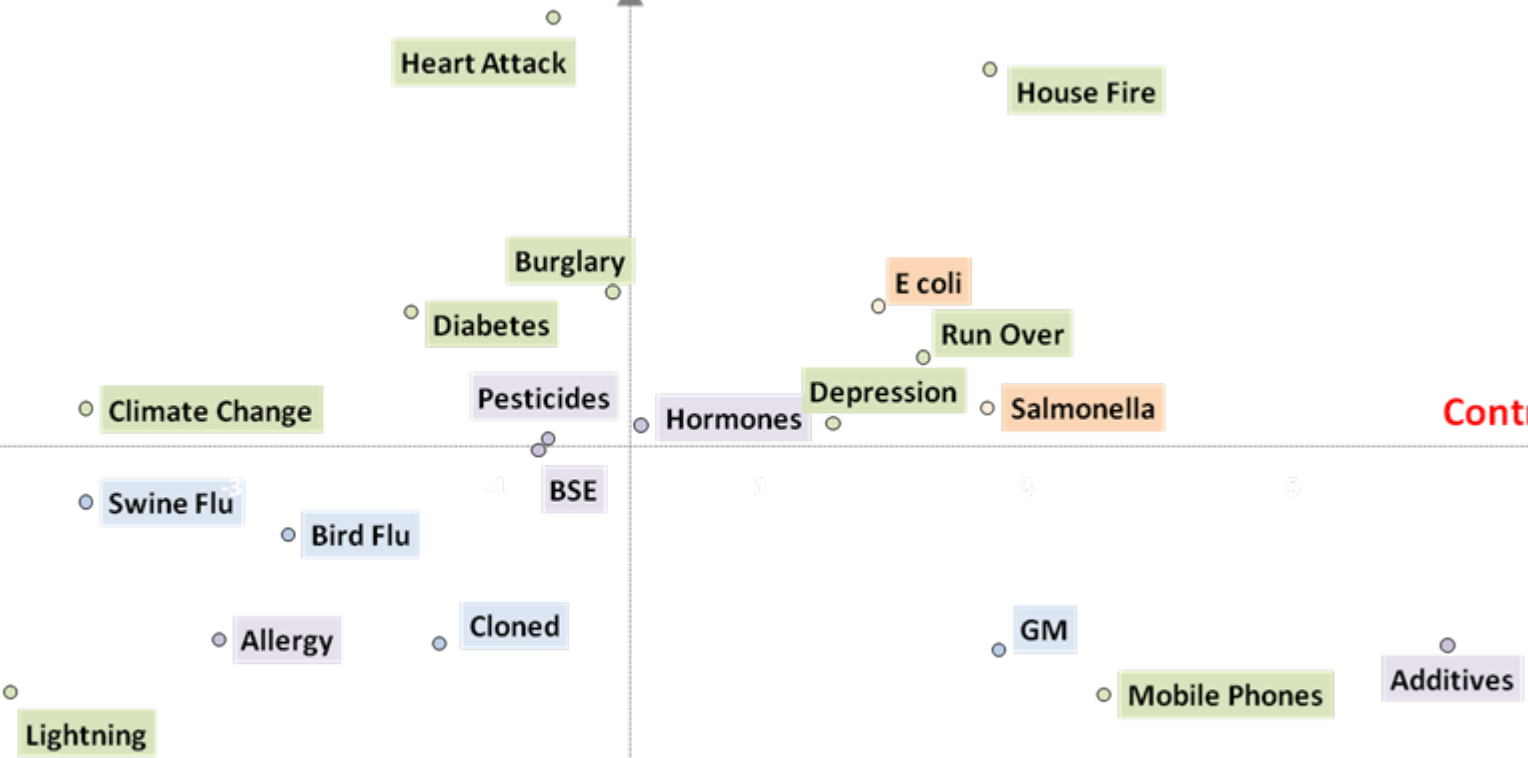
Worry

Control



Low Control  
Low Worry

High Control  
Low Worry





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