isk is a very heavily used word in multiple and varied situations: investment risks, the risk of adrenalinepumping sports and, particularly at this present time, health risk. The peculiar thing about risk is that it is both personal and relative; a risk may be recognised and assessed as acceptable if it is in relation to something we want, or it may be considered as unacceptable if it is in relation to something about which we feel ambivalent or negative.

As scientists we spend our lives assessing risks. A risk assessment is an objective evaluation of the risk of harm or error associated with a certain action or activity. As scientists, we are very good at being objective and assessing risks, but as individual people we are as susceptible as anyone else to our own rational or irrational fears.

The potential risk of blood clots associated with the AstraZeneca COVID-19 vaccination has been a frequent subject in the news and it is of genuine concern that the small risk associated with the vaccine may be sufficient to deter some people from accepting it, even though the risk of serious illness is greater. This is not a logical response but neither is individual perception of risk. What is seriously worrying though is the apparent campaign of anti-vaccine fear from groups that seek to exploit individual worries and concerns on risk.

I know some people express incredulity

PERCEPTIONS



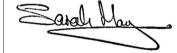
Sarah May, Deputy Chief Executive of the IBMS, on vaccine hesitancy and risk aversion.

that some healthcare workers, with all their knowledge of immunity and risk, are still hesitant to take the COVID-19 vaccine. I must confess that was my initial reaction, but having thought about it. I can understand it because we all have irrational fears that are built around our own personal evaluation of risk. Altering personal perceptions of risk is a slow process - just think back to the MMR vaccine controversy. Confidence building is a slow-burn project built on trust.

I am almost legendary for my level of risk aversion; my biggest professional dilemma recently has been whether to keep Congress in September 2021, or move it you March 2022. I am very pleased that the lower-risk decision to change to next year was taken and the full programme can be

found in this edition of The Biomedical Scientist. I am confident that this will be a successful risk-managed event.

To close on a light note, I have now discovered the risk of leaving a pair of gardening gloves in the vicinity of a bored dog. Yes, my Easter excitement was a trip to the vet for the administration of a medical emetic (for dog, not me). Thirty minutes, fifteen vomits and one returned gardening glove later gave me plenty of time to re-evaluate that risk.



Sarah May **Deputy Chief Executive**



Institute of Biomedical Science is the professional body for the biomedical science profession.

INSTITUTE OF BIOMEDICAL SCIENCE

12 Coldbath Square London, EC1R 5HL United Kingdom +44 (0)20 7713 0214 +44 (0)20 7837 9658 Email: mail@ibms.org Web: www.ibms.org

PRESIDENT Allan Wilson CSci FIBMS

CHIEF EXECUTIVE Jill Rodney

DEPUTY CHIEF EXECUTIVE Sarah May CSci FIBMS

EXECUTIVE HEAD OF EDUCATION Alan Wainwright CSci FIBMS

EXECUTIVE HEAD OF MARKETING AND MEMBERSHIP Lynda Rigby

HEAD OF COMMUNICATIONS Dan Nimmo

FDUCATION AND TRAINING education@ibms.org

EXAMINATIONS examinations@ibms.ora

MEMBERSHIP mc@ibms.org

CHARTERED SCIENTIST chartered@ibms.org

FOLLOW THE INSTITUTE





