



MEDIA TRAINING:
GETTING YOUR MESSAGE OUT

STRATEGIES FOR EFFECTIVE
MESSAGING

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No Disclosures

- AAP Spokesperson – T.V. Radio Print
- Repeat guest on CNN’s Headline News, CBS News, HealthyChildren.org Podcast
- RadioMD host for peer-to-peer medical podcasts

Being interviewed is not a reactive situation

- The Ask
- The Prep work
- The Interview
- The Follow-up

THE ASK

- Basic info: How long is the segment or article?
- Will there be other experts? – If you are doing a debate and not an interview, you need to know.
- Is it live or taped? – Live may seem harder, but don't need to worry about editing

WHY NOW? Insight into what the angle is -- New study, current event, the anchor just had an experience, trying to tie it to another story or segment

The interviewer obviously has their job to do.

You have a job to do too

- You're "the guest" but you're also the EXPERT. You know more than anyone else in the room.
- As a pediatrician, you have a **job to get certain information to the public.**
- You have to be proactive.
 - *You know what you need to convey to the public.*
 - *Its your job to get them to ask you the right questions to make that happen.*
- We do this by
 - *Preparing*
 - *Controlling the interview*

THE PREP WORK

- You may know the information, but you still need to PREPARE
- We all talk about this stuff everyday, but doing an interview is not the same as talking to a patient
- Depending on the medium your time to get your messaging out changes
 - *1-2 minutes for Taped TV segments*
 - *3-4 minutes for Live TV*
 - *5-10 minutes for Radio*
 - *Print you may end up talking for 15 or longer*

Take home message

- Jot down “key messages”
 - *What is it most important for every parent to know?*
 - *What is it least likely that they know already?*
- Quick 1-2 sentences that can sum up “take home messages”
 - *Verbalizing them ahead of time will help to work out the kinks, find the right verbiage, and stop you from having things on the tip of your tongue.*
- Look up stats so you have them ready. But try not to get overly technical. Keep numbers to a minimum.
 - *make any numbers easy to digest quickly. You don't need to be exact, 63% = about 2/3's*

Do your research

- Are there new studies or policy statements?
- Google search keywords to see if there is anything the reporter may find when prepping. Current events often end up in interviews
- Know your local resources -- Your hospital communications department may have talking points. The AAP has talking points through the Communications Department
- If you are being interviewed by a major news network, let the AAP know.
- Consider becoming an AAP Spokesperson

The Scaffold and the Transitions

- You need to break up your answer, rattling off 5 minutes worth of advice isn't the same as an interview.
- Think about the information you need to convey during the interview. Map out a logical flow from one idea to the next
- Have transition statements in mind that will prompt the interviewer to ask you the next question

The Trojan Horse

- Share study links
- Send them your talking points
- Share info they may need info for graphics
- If you're on the wrong page, they'll hopefully let you know

THE INTERVIEW

- Control the interview
- Tee up the next question
- Steer the flow of the conversation to cover the information you need to convey to the public

Think like the reporter

- You want to get out accurate information
- They want ratings – You're not always aligned. Foresee what might they ask you
- Be wary of what angle or narrative a reporter might have
- Try to predict any "gotcha" questions or tangents – and have an idea of how you'd answer
- Avoid sound bites – always give a complete answer – don't expect to get a chance to clarify

Don't be forced to answer a bad question

YOU DON'T ALWAYS NEED TO ANSWER WHAT THEY ASKED

Bridging techniques and pivots

- “Great question, and what’s most important,”
- “I am not aware of that, but what I do know,”
- “I wouldn’t put it that way exactly, but what I would say is,”
- “More importantly,”
- “Keep in mind,”
- “That said,”

Keep it friendly

Depending on the format you may have to flesh out the interview:

- Anecdotes
- Family stories
 - *“In our house we were having the device curfew argument, but now we . . .”*
- Include the host, “I don’t know if you’ve had this experience, but . . .”
- Showing personality is okay

Putting it to the test:

- Easy Interview on SIDS - OR NOT?!?!?!?!?
- Ask why now?
- Prepped for the “gotcha” and the tangents
- Don’t get backed into a corner
- Pivot
- Have your message – get that out
- Lead the interview by ending statements with a lead into next question
- Avoid sound bites

THE FOLLOW-UP

- Print interviews: offer to read the article to double check for accuracy.
- Ask to have the article or hit sent to you once its completed. You want to know if you've been misquoted so you can get in front of it.
- Offer to help promote it by sending it to the AAP, or your hospital communications department or linking to it on your social channels

Using your connections

- The relationship goes both ways
- You can reach out to producers, show runners, journalists to pitch them ideas as well – Keep it casual. Don't be pushy.
- Send them a study
- Tell them why its relevant
- Offer to be interviewed

ADDRESSING A CRISIS

- Have a point person for interviews. You don't want a lot of competing messaging.
- Make sure you're clear as to what you can share. HIPPA. Police information.
- Work with your communications department. – If it's a crisis you are doing the doctoring, let them do the leg work for you.
- Ask for what you need.

Crisis Messaging

- Less is more. Always be accurate.
- If its complicated say, “Its complicated.” Don’t make things so simple that you aren’t being 100% truthful
- Avoid Speculation – be honest if you don’t know something or if its outside your purview
- Provide Reassurance if you can, but not if it’s not truthful
- Stand your ground – do not be pressured into answering questions or discussing topics that you don’t feel are relevant or that you aren’t qualified to answer in your role as a physician
- You are representing the hospital. If you give your opinion, make sure it is clear that it is your opinion.

LOOKING PROFESSIONAL

- Simple one-color tops, preferably with some sort of sleeve.
- Avoid patterns. For ties, very simple patterns are okay.
- Simple jewelry.
- It should be about what you say, but appearances effect how people perceive you. You're not competing with the anchor that has had hair and make-up done, but you do want to look put together. Better to pull hair up in a bun, than look disheveled.
- A white coat can make almost any outfit look professional.

QUESTIONS AND DISCUSSION

- Critiques
- Practice

