# **Nurse Advocacy Through Media Communications**

By Cindy Zolnierek, PhD, RN, CAE



## **Throughout the COVID-19**

**PANDEMIC**, the media has shared images of nurses donning trash bags as protective clothing when supplies ran out and bearing facial marks from long hours wearing masks and respirators. This public health crisis provided an opportunity for nurses to respond through the media, leveraging our public trust to educate communities and promote facts and evidence-based recommendations. Effective media engagement requires that nurses understand why it's important to work with the media, use the appropriate skills and competencies to convey a compelling message, and appreciate journalists' perspectives.

# WHY ENGAGE WITH THE MEDIA?

The 1997 Woodhull study revealed a paucity of healthcare articles that referenced nurses. When the study was replicated in 2018, the prevalence of nurses in the news media had dropped from 4% to only 2%. When nurses were cited, the topic centered on the profession rather than healthcare policy. Study recommendations included educating nurses about the use of media communications and providing them with the skills and competencies to communicate effectively.

Why is effective media communication important? The 2010 Institute of Medicine report The Future of Nursing: Leading Change, Advancing Health emphasized the importance of nursing leadership and influence, due in part to public trust and nurses' unique perspectives. As the original Woodhull study stated: "Ultimately, the public is probably best served by shared confidence in physicians, nurse practitioners, nurses, and all healthcare providers." For 20 years in a row, nurses have topped the Gallup poll for perceived honesty and ethics. Our trustworthiness requires us to inform and educate the public, especially during public health emergencies.

The pandemic has boosted interest in what nurses have to say because we've been on the frontlines and witnessed the horrors of COVID-19. The public cares about nurses, appreciates our role, and knows they need us. And the public trusts what we say about the need to physically distance, wear masks, and get vaccinated. The media has reached out, and nurses have had a unique opportunity to demonstrate their value to journalists.

## UNDERSTAND THE JOURNALIST PERSPECTIVE

Many journalists are unfamiliar with the broad range of nurses' roles, education, and scope of practice so they may not consider reaching out to nurses for interviews other than for a specific piece about nurses (for example, staffing shortages during the pandemic). This lack of understanding presents an opportunity to educate journalists about the profession and its contributions to healthcare as well as to individual patients. Begin by developing relationships with journalists.

Mason and colleagues suggest emailing a journalist when you notice a health news story that may have benefitted from a nurse as a source, inviting a journalist to a professional meeting or for a cup of coffee to discuss opportunities, and informing a journalist interviewing you that you want to be identified as a nurse. I always identify that I'm a registered nurse above any other title or credential. That's the voice with which I speak. My doctorate is a degree, chief executive officer is my position, RN is my profession. The journalist is interviewing me because they're interested in the nursing perspective, and I want to be certain the public understands that they're hearing from a nurse.

Make yourself available as a resource to journalists when they're investigating a story, and respond promptly to requests for an interview. Journalists work under tight timelines and sometimes make requests only hours before their deadline. Journalists need background, context, data, or other information, so becoming the source for these details helps to establish your value as a contact and increases the likelihood of being approached for a future interview.

When journalists don't know how to find a nurse to interview, they may reach out to organizations that represent (unions or professional associations) or employ (healthcare organizations or universities) nurses. Communications or public relations staff frequently serve as the point of contact for media and can be a helpful resource in preparing you for interviews. Some organizations may be reluctant to call on nurses who aren't their official spokespeople. You can address this concern by being clear that your statements reflect your perspective and not that of the organization.

A journalist may come across as friendly or unfriendly depending on the nature of the interview. Don't take it personally.

#### BUILD MEDIA COMMUNICATION COMPETENCIES

Effective communication, especially via the media, requires skills and competencies built with intentional effort and action. Being prepared for media communications enables nurses to engage when the opportunity emerges.

#### CONVEYING A COMPELLING MESSAGE

When speaking with a journalist, remain professional. If the interview is conducted via video, dress appropriately and use a professional backdrop. If you'll be interviewed in a studio, be prepared for bright lights. Also consider the following tips for a meaningful interview.

Ask the journalist for their questions or focus of inquiry

in advance. Especially in live interviews, you can best prepare if you know the questions you'll be asked. Some journalists won't provide questions in advance, but they may share what prompted their request (for example, a new Centers for Disease Control and Prevention recommendation, reports that local hospitals are overcrowded, or a rush on home pulse oximeters). Use that information to prepare, identify any related controversy, and anticipate how the interview may unfold. Consider how you'll respond if asked your opinion of those with an opposing view.

Identify the key messages you want to share. Unless your interview is live, your comments may be reduced to a few sound bites. Your job is to convey your key message precisely and concisely within those sound bites. Pause for a moment and be thoughtful before responding to a question. Don't feel compelled to continue talking to fill dead air-stay on message. At the end of an interview, the journalist may ask, "Is there anything we haven't talked about that you'd like to add?" Take this opportunity to reiterate your key messages, especially if you haven't had the opportunity to express them.

You don't have to answer the question as asked. This is especially true with close-ended questions, such as, "Did the governor do the right thing by lifting restrictions on restaurants?" Rather than responding yes or no, relate a key message, such as "We know physical distancing is effective in preventing spread of the virus. Individuals may choose not to visit restaurants with full occupancy to protect themselves." If you don't know the answer to a question, it's acceptable to say so. Don't hesitate to say, "I'm not able to provide you with an informed response to that question."

Is it a friendly or unfriendly interview? Does the journalist have a specific angle to the story or are they in the preliminary stages of investigating and learning more about an issue? If the journalist is attempting to get nursing's opinion on a controversy, stick with the facts. Stating a position may be advised when it's backed by science (wearing masks in public provides some protection from coronavirus transmission) or when a nursing organization has a position (advance practice nurses should be granted full practice authority). However, casting judgement on a government official's decision or an individual's behavior requires careful consideration before going on record.

Friendly interviews include those in which the interviewer is exploring an issue to better understand it or is attempting to get sound bites to advise the public (for example, "How can the public best protect themselves from COVID-19?"). Other friendly interviews during the pandemic have been about nurses (for example, "How can the public support nurses?"). Both of these inquiries provide opportunities to repeat key messages about physical distancing, mask wearing, and handwashing.

A journalist may come across as friendly or unfriendly depending on the nature of the interview. Don't take it personally. Journalists are doing their jobs to get a story that will be of public interest. Whether friendly or unfriendly, consider yourself "on the record" for the entire conversation. Don't make offthe-cuff remarks. They might be the sound bite that's used.

Will the interview be live or recorded? Whether print, audio, or video, recorded interviews are most common. On the one hand, recordings allow for editing, which has advantages and disadvantages. Gaffes can be edited out, and you may have the opportunity to correct or restate comments. On the other hand, edited sound bites may not include context, changing the meaning of what was stated. If this happens, follow up with the journalist. The goal is to establish a positive relationship so that you'll be available for future stories. Live interviews don't offer the opportunity for editing, although commercial breaks can afford requests for midstream adjustments, such as clarifying a previous response, if the journalist is willing. In a live interview, timing matters. The scheduled airtime is limited, and you may get cut off, so plan your comments accordingly.

#### TO THE PUBLIC'S BENEFIT

Public health emergencies create opportunities for nurses to demonstrate their expertise and value by connecting with journalists and helping to shape their stories. Tap into nursing and healthcare organization training to develop competencies in media communications so you can effectively engage with journalists. As nurses become more frequent sources for journalists, the public will benefit. ?

Cindy Zolnierek is the chief executive officer of the Texas Nurses Association in Austin.

#### References

Institute of Medicine. *The Future of Nursing: Leading Change, Advancing Health.* Washington, DC: The National Academies Press; 2011. doi:10.17226/12956.

Mason DJ, Glickstein B, Westphaln K. Journalists' experiences with using nurses as sources in health news stories. *Am J Nurs.* 2018;118(10):42-50. doi:10.1097/01.NAJ.0000546380.66303.a2

Mason DJ, Nixon L, Glickstein B, Han S, Westphaln K, Carter L. The Woodhull Study revisited: Nurses' representation in health news media 20 years later. *J Nurs Scholarsh.* 2018;50(6):695-704. doi:10.1111/jnu.12429

Saad L. Military brass, judges among professions at new image lows. *Gallup News*. January 12, 2022. news.gallup.com/ poll/388649/military-brass-judges-among-professions-new-image-lows.aspx

Sathasivan K. Communicating about COVID-19: How TNA staff and members responded to an evolving challenge. *Texas Nursing*, 2021;95(2):16-8.

Sigma Theta Tau International. The Woodhull study on nursing and the media: Health care's invisible partner. Indianapolis, IN: Sigma Theta Tau International, Center Nursing Press; 1997.