Networking and Nature Event at Longwood Gardens

by Irene Kopia

A beautiful autumn day was the backdrop for a casual lunch and leisurely stroll amid the grandeur of Longwood Gardens in Kennett Square, PA in October. Fellow AMWA-DVC members Don Harting (Program Chair) and Michelle Stofa (a long-time member of Longwood Gardens) led the AMWA-DVC group and guests to The Café, where everyone enjoyed friendly socializing on the outdoor patio. All agreed that it was nice to meet in-person again!

The DVC provided gift cards to pay for lunch, during which chapter board members in attendance shared AMWA-DVC news. Our subsequent touring was eased and informed by Michelle's familiarity with Longwood. We explored the fountains and gardens together, continuing conversations along the pathways lined with brilliant hues of red, yellow, and purple chrysanthemums. It is not surprising that some were inspired with ideas for their home gardens. It was a unique networking afternoon.

AMWA-DVC members and guests enjoyed nature and networking at Longwood Gardens.

Irene Kopia is a Senior Director of Content Strategy at Evoke Navience! In Princeton, NJ.
Authenticity, Energy, and Practice: Improve your Public Speaking Skills Today!

by Christine Durst

“It’s all about the entrance – you have to command the room.”

Opening with a dramatic question – “Would you rather do a public presentation, or drop dead?” – Hope Lafferty certainly commanded the room as she led the “Public Speaking for Private People” session at the 2022 AMWA Medical Communication Conference in Denver. She noted that public speaking is the top phobia in the US, more than death, heights, spiders, zombies, or clowns. We started with an interactive exercise to – gulp! – make us practice public speaking despite our fears. Thankfully we all survived to discuss our experiences and goals for improving our public speaking skills.

Comfort Zone vs Success Zone

Lafferty observed that “your level of success is directly proportionate to your willingness to be uncomfortable, because that’s when growth happens.” We grow better when prompted, just like a plant that grows robustly from places where it has been pruned.

But how do you grow out of your comfort zone? Lafferty suggested videotaping yourself on your phone – there is nothing more unforgiving – to see an objective reflection of how you are coming across. For example, you may not realize how much you gesture until you see yourself in a video, which can prompt you to learn to control your gestures. One attendee also suggested a Zoom Improv Class, for practicing taking risks within a safe format.

Elements of Good Public Speaking

- **Presence – connecting with your audience** “Only 10% of what an audience remembers is the actual words you say.” The body language, eye contact, gestures, facial expressions, and intonations of how you say it make a much deeper impression.
- **Projection – how you speak** “You want people to hear your confidence, not just listen to the words.” Use strong volume and energy, avoid muttering or speaking in a monotone, and watch the pace. “You want your audience to ride along with you instead of feeling left behind.”
- **Conviction – believe what you say** Dr. Vincent Covello, founder and director of the Center for Risk Communication, says: “People don’t care what you know, until they know that you care.”
- **Heart – get out of your head** Tell your stories, not just your academic accomplishments, because that is your truth. It is okay to make mistakes if you are speaking from the heart.
- **Energy is everything** You’re either giving energy – bringing life to what you’re saying – or taking it away by saying it poorly.
- **Authenticity overrides form** “People don’t go to the theater or movies for the details, they go for the experience – that’s what you are developing between you and the audience.” Be yourself, be sincere, and facilitate a dialogue rather than a lecture.

Dealing with Nerves

The group discussed the nervous anxiety that accompanies public speaking, and strategies for overcoming it. Because it is a lower-brain function, we can’t get rid of it, but we can learn to turn it around. We can expect it, accommodate it, and move forward.

- “Remember that the audience wants your message, and use that to keep yourself motivated.”
- Use humor to help yourself relax and connect with the audience.
- Start with a poll to get a read of the audience.
- Tell a friend your embarrassing stories to reduce the power of the insecurity.
- Do vocal exercises to train your voice.
- “Expect that you will offend someone, so don’t worry about it and just be authentic.”
Ultimately, Lafferty reassured us, we are already capable of doing this. As medical writers, we know how to convey a message on paper – we just have to practice speaking it out loud, with presence and projection and conviction. Getting nervous and stressed makes us doubt ourselves and forget what we know. So try to relax, stay centered, and remind yourself: You can do this!

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AMWA-DVC Chapter Dinners at the AMWA National Conference, November 2-5 in Denver, CO

Alvarez Award Winner Spoke to the AMWA National Membership on Public-Health Communications in Complex and Controversial Times

by Jacqueline M. Mahon

Dr. Leana Wen, who received the Walter C. Alvarez Award* at the 2022 AMWA National Conference, delivered a fiery presentation on November 4, 2022 about public health communications in complex and controversial times. Dr Wen is an emergency physician, professor of health policy and management at George Washington University, and nonresident senior fellow at the Brookings Institution. She is also a contributing columnist for The Washington Post, a CNN medical analyst, and author of the critically acclaimed book on patient advocacy, When Doctors Don't Listen: How to Avoid Misdiagnoses and Unnecessary Tests (2013) and a memoir, Lifelines: A Doctor's Journey in the Fight for Public Health (2021). We were fortunate to be addressed by this expert luminary.

Long-Neglected Issues to the Forefront

Wen began with an overview of learnings from the COVID-19 pandemic. Health disparities and social determinants of health (SDOH) as well as the lack of U.S. public-health infrastructure are now receiving the attention they have long deserved. During the pandemic, for example, it was a privilege to be able to engage in social distancing. But this simple mitigation strategy was not available to everyone. The Economic Policy Institute noted in 2020 that, “less than one in five black workers and roughly one in six Hispanic workers are able to work from home.” In addition, “Only 9.2% of workers in the lowest quartile of the wage distribution can telework, compared with 61.5% of workers in the highest quartile.”
In another example, SDOH affected vaccine distribution because those with smartphones and technical skills could pursue the first vaccination appointments. Dr. Wen underscored that health outcomes cannot be separated from SDOH such as housing, food, education, access to healthcare, etc. The pandemic worsened existing health disparities and underlying inequities for several populations, but especially for people of color (ie, Black, Hispanic, American Indian/Alaskan Native, and Native Hawaiian/Other Pacific Islander people). Among Black Americans, who represent about 13% of the U.S. population, the COVID-19 infection and death rates were disproportionally high.

The struggles of healthcare workers and health communicators during the pandemic illuminated the poor state of U.S. public-health infrastructure. Wen shared that public-health staff are always having to “rob Peter to pay Paul” - discharge one debt only to incur another. During the pandemic, this meant that staff already wearing multiple hats and trying to focus on school health were told to set up COVID-19 vaccine clinics and testing sites. There are many such examples. In general, the actions of the public-health system involve pulling personnel from crucial priorities to address other emergencies. “Nevertheless,” Wen remarked, “public health is the first work area on the chopping block at budget time.” It is always under-funded.

Faulty Communications and Broken Trust

Public health depends on public trust. Dr. Wen shared that the main point she wishes she and others had communicated at the start of the pandemic is: “Change is to be expected.” Communicating about change is the bedrock of sound public-health policy when you are in the middle of an ever-changing situation like a new virus and a new pandemic, Dr. Wen continued. The science evolved, as science always does, and the public should have been prepared by public-health officials for this inevitability. Arguments against vaccines and various public-health protocols were based on accusations that public-health officials were flip-flopping. But circumstances were changing rapidly. For example, there was an initial concern about surface transmission of the coronavirus. Also, vaccines were presumed to prevent infection and severe illness. But later data showed that surface transmission is rare, and the vaccines are not 100% effective against infection; rather, they are effective at preventing severe disease, hospitalization, and death. When trust in public health is eroded, Dr. Wen noted, it is very difficult to win back.

The silver lining among the communication missteps is that prior to this pandemic, people were not thinking about public health. Today there is a new emphasis on why it matters. Wen described her participation in a focus group that involved interviewing people from all political parties about their COVID-19 beliefs. She quickly realized that, to participants, masks and vaccines meant something other than what they actually are. They are public-health measures that help reduce virus transmission. But a group against these measures considered masks and vaccines as flip-flopping. But circumstances were changing rapidly. For example, there was an initial concern about surface transmission of the coronavirus. Also, vaccines were presumed to prevent infection and severe illness. But later data showed that surface transmission is rare, and the vaccines are not 100% effective against infection; rather, they are effective at preventing severe disease, hospitalization, and death. When trust in public health is eroded, Dr. Wen noted, it is very difficult to win back.

Unfortunately, said Wen, it is not always clear how to achieve that balance. Some group is always accusing public-health officials of poor policies, because the policies are not good for them. However, reaching balance is even harder now. According to Wen, the degree of backlash against public health resulting from the pandemic has never been seen before. More than half of states have passed laws restricting public-health authorities. This new environment will affect not only COVID-19, but also other issues in the future. Childhood immunization rates have fallen.† Previously accepted immunization advice is now being questioned by parents. Wen has significant concern that the heavily politicized backlash against COVID-19 restrictions is bleeding into other critical health issues. She fears that this backlash is going to hurt what public health can do in the future.

De-Politicizing Public Health

“We have been attacked for our views,” said Wen. “Both myself and Dr. Peter Hotez [the 2022 McGovern Award winner and an expert in neglected tropical diseases, global health, and vaccinology] have been verbally accosted and even threatened. You might think it is just the anti-vaxxers, but these attacks come from all sides.” In a novel perspective, Wen recommended that trust may be restored by widespread education that good health is not just the absence of COVID-19. “The more we keep focusing on COVID-19, the more it is going to bleed into and have consequences for other aspects of public health. COVID-19 has been inserted into the middle of culture wars. If we have any chance of depoliticizing public health and bringing it back to a nonpartisan stance, we must pull focus away from COVID-19 and put it on other health issues – ideally, those that are not subject to the same polarization.”

Moving Forward

Wen proposed three ways forward:

1. Those who communicate about public health must be transparent and intellectually honest.
Wen shared her experience at a 2021 conference on topics including COVID-19 vaccines, boosters, and immunity for a lay audience. Three people approached her afterward to whisper the question: “Is natural immunity a real thing?” They did not want to ask in front of everyone because they feared being attacked - for simply asking a question. In fact, said Wen, there is some level of natural immunity after having COVID-19. But public-health communications during the pandemic excluded this information because there was a fear that people would not get vaccinated if they learned it. Vaccines boost any natural immunity. But the problem was not acknowledging its existence. The public then knew officials were hiding information.

In another example, en stated that “we” (public-health officials and physicians) should have said: “Masks may be helpful; we are not sure yet. But there is a limited number of masks, and we need to save them for healthcare workers.” This transparent communication could have avoided accusations of flip-flopping. People deserve the truth. And, importantly, multiple things can be true at once. So communications could have included the information that mitigation measures do reduce virus spread, but they come at a cost. When the public was told not to gather, the message should have referred to the costs of this measure, and not only emphasized the benefit.

2. “Follow the science” is not a sufficient motto; better core messages must be devised.

Consider the question, when do mitigation measures end? One answer is, when the numbers of infections, hospitalizations, and deaths are acceptable. But the question is not only scientific. We must account for societal value. We must know: What is the public’s current stance on the issue? There is no point in making recommendations if people will not follow them. Dr. Wen proposed harm reduction as a way forward. The idea is to work around where people are on the issues. Critical to this approach are understanding and accepting nuance and changing circumstances. “Just because most people have returned to ‘normal,’” said Dr. Wen, “does not mean that everyone wants to.” Instead, public health can aim for societal change by focusing on (for example) improved ventilation and paid sick leave.

“Good health is not just the absence of COVID-19. We should push back against polarization and simplification.”

3. We must seek hard truths.

Wen noted that much conflict is manufactured. Information is taken out of context. Some people insist on black-and-white messaging with no gradations for changing science, evolving expertise, and a mutating virus. Public-health communicators must promote fairness. In addition, many other topics are worthy of focus, including the re-emergence of polio, the opioid epidemic, and mental-health issues (the last of which are getting worse and have been long neglected).

* The Alvarez award recognizes excellence in communicating healthcare developments and concepts to the public. Walter C. Alvarez, MD, was a pioneer in the field of medical communication. AMWA members can read AMWA’s announcement about the naming of Dr Wen as the award recipient, which includes a detailed biography, here:

† In August 2022, the American Academy of Family Physicians shared new data from UNICEF and the World Health Organization suggesting that while childhood vaccination rates have dropped considerably in many parts of the world, they have mostly remained steady in the U.S. since the start of the COVID-19 pandemic.
AMWA National Conference attendees gather for presentation of the Alvarez Award.

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