

Pediatricians on the radio and television

Some educational groups use the term *training*, either in relation to *educational* or *updating* activities when they refer to the education of pediatricians and other health care professionals. However, when educating the community, this task is called *health care education* or *community education*. This is the standard term I will use in this article.

Community education is a highly specialized activity; worldwide, there are courses, careers, symposia focused on this topic and we, pediatricians, lack such training.

However, it is relatively common that we get invited to participate in mass media (radio, television) interview shows with the aim of discussing topics related to child health. Such shows may have a local or national coverage but our participation should always be taken with a great sense of responsibility, not only because of the useful messages we may convey to the community and the size of the audience but also because they counteract many harmful messages that are constantly being issued (advertising of alcohol, junk food, incitement of violence, etc.).

In general, however, we devote little time to preparing such interviews. When we have to give a talk to colleagues (30 or 40 people), we prepare our lecture with great care and long anticipation. Instead, and paradoxically, when we are asked to talk in the media, which have a much larger audience (hundreds or thousands of people), we only devote a few minutes to prepare before the show.

In this article, I would like to make a few recommendations that should be followed when we have to be on the media as part of community education activities.

- 1) Try to gather information about the show characteristics and the journalist who has invited you: coverage, style, level of seriousness, and level of commitment with child health. You can watch previously broadcast shows on the web or other sources.
- 2) Strive to clearly define the topic to be discussed with the journalist inviting you. In this case remember that, in spite of any previous agreement, the journalist may, in the middle of the show, ask you about different topics.
- 3) Try to understand the type of audience the show has: the population at large, teenagers, etc. This will help you understand who you are talking to. The time the show airs can provide a clue.
- 4) Do not talk about diseases. Information related to symptoms, potential tests, treatments or complications is not at all useful for the population. Quite the opposite, it may cause great anxiety. Imagine, for example, the harm that may be caused by saying in a show things like "headache is the first symptom of a brain tumor," or "meningitis in a child may start with a common cough or upper respiratory tract symptoms" or, worse still, "it may lead to paralysis, blindness or permanent deafness," as I have personally heard on one occasion. This recommendation does not include prevention measures that I will discuss below.
- 5) The core objective of community education is **to help the community protect their own health, empower their freedom to promote their own health, and prevent health problems**. In my understanding, the three most important objectives or issues are the following:
 - **Health promotion.** Teach what measures a parent or an adolescent or the community may put into practice to improve their own health or their neighbor's health. For example, "telling a story stimulates love for books and therefore improves language", "play in a child stimulates psychomotor and emotional skills", "attending kindergartens promotes development", etc.
 - **Prevention of health problems.** For example, "folic acid intake by adolescents before pregnancy prevents neural tube defects in their offspring", inform parents and adolescents that "inbreeding couples have a risk of having children with diseases of recessive inheritance", "hand washing after using the toilet prevents fecal contamination of food and, therefore, the diseases transmitted by these bacteria", "avoiding alcohol during pregnancy prevents fetal alcohol syndrome and, in adolescents, it prevents traffic accidents".
 - **Use of health care services.** We can teach the community about periodic well-child care visits and control visits for chronic diseases, where to go in case of emergency, etc. We should teach how to use available health care services in the best manner possible.
- 6) Prepare a list of the messages that you want to convey to the community according to the following guidelines:

- Messages should be developed **based on what you consider the audience should know and not based on what you want to teach**. You should think what information the audience needs to support their ability to protect their own health, not saying everything you know about the specific topic
 - Messages should be clear, brief, and in an accessible language; leave out medical jargon and technical words.
- 7) Messages are more effective if stated categorically, even though there may be scientific exceptions that might contradict them. For example, it is true that drinking certain amount of red wine is associated with a reduction in blood cholesterol but, in a community education program show, if a journalist asks you if alcohol is good for your health—knowing that chronic alcohol abuse is the most generalized addiction in the country, with harmful consequences for health—the pediatrician or physician should answer: “Alcohol is harmful for your health”. When you are addressing thousands of people, you have to state your point categorically, for example: “Every child should be breastfed during the first six months of life”. This is my point of view.
 - 8) Learn to handle questions from journalists. Not every journalist will accept that you give them a list of questions, and not all those who do accept it will follow your instructions during the show. Very few journalists study the topic that will be discussed; some of them come unprepared and may pose questions that lead you away from the topic or, even worse, may ask questions containing harmful messages. For instance, “tell me, doctor, why is it that when antibiotics are given to a child with flu they may cause diarrhea?” The metamessage of this question is that children with take antibiotics. The pediatrician should be alert to not accept this fact by giving a quick or distracted answer; rather this point should be immediately contradicted.
 - 9) Try to keep to the messages you want to convey, if necessary, **regardless of the questions made by the journalist**. For

example, you want to give a message on the prevention of obesity but the journalist asks: “doctor, why children do not want to have their soup?” (which is completely irrelevant). Then you answer something like this: “that is an interesting question. In this regard, I can tell you that it is very good for mothers to include vegetable and fruit in meals as well as stimulating children to exercise”.

- 10) Use a friendly intimate tone. If you are talking to hundreds or thousands of people, technology helps, it expands and makes your words travel far. Speak as if you were talking to a friend in a kind tone. If you are on television, smile. If you are on the radio, that smile will be noticed in your voice. Never yell or gesticulate but try not to be monotonous.
- 11) Listening to the audience is part of the strategy for community education and should always be present in meetings with mothers or neighbors, etc. But this issue has not been dealt with here because the media (radio, television, etc.) are not mass communication media (as they are usually called) because they do not allow a two-way communication since there is no microphone; they should be called *mass broadcasting media* instead of *communication media*.

I do believe that these recommendations could help pediatricians accomplish such a relevant task as that of community education. ■

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Recommended references

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