Working with the media

How to make your messages on tuberculosis count









Working with the media: how to make your messages on tuberculosis count

WHO/HTM/STB/2009.57

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Design and layout by Engage Write & Design, Geneva, Switzerland. www.engage-geneva.ch

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Introduction

Significant progress has been made by national tuberculosis programmes and partners globally to reduce the burden of TB. Despite continued efforts however, case detection rates have been stagnating, programmes are facing challenges in reaching high-risk populations and stigma and discrimination of people with TB continue to hamper efforts to get people timely diagnosis and effective treatment.

We cannot effectively fight TB without reaching all the people who need to hear messages about TB prevention, symptoms, and treatment and act on them. This is where working with media can have significant impact.

The media, which are highly influential and have a wide reach, are a powerful vehicle for getting messages to audiences you could never reach on your own.

The aim of this handbook is to give you and your organization some of the tools, and the confidence, to help spread our important messages through the media. The hope is that you will feel more comfortable, better equipped and keen to reach out to the media with our key messages about the need to address TB on an urgent basis.

The handbook walks you through the planning and execution of media outreach: from thinking about your goals to attracting media attention. Tips and suggestions for developing your key messages, handling interviews, writing news releases and calling journalists are also included.

With the media's scope and influence, we can reach people who need treatment, educate the public to this health risk in their midst, increase awareness of TB among health workers, encourage politicians to put TB higher on their political agenda, and donors to provide the money to help us achieve our goals.

In essence, we can effect great change towards stopping TB.



Develop a clear plan

What's your goal?

Before you begin a communications strategy or media outreach, you must be clear what bigger organizational goal you want to achieve. Otherwise you won't be focused on where you're going, how to get there, or whether you've reached your goals with the media outreach.

For example:

We want to increase the number of people with TB symptoms seeking timely diagnosis and effective treatment.

Whom do you need to reach to help achieve that goal?

The next step is to list the groups or individuals that need to take action so as to achieve that goal. Try to be as specific as possible.

These are your Target Audiences.

Some of them will be those who can actually take the specific action or decision that will achieve your goal. They have their 'finger on the trigger', so to speak.

They are the Primary Target Audience.

Others will be in a position to influence or persuade the Primary Target Audience to take action or the decision.

They are the Secondary Target Audiences.

Primary Target Audience example:

The Primary Target Audience for our goal would be people with TB symptoms because we want them to come for diagnosis and treatment.

Secondary Target Audience example:

The Secondary Target Audiences include such people as doctors and health workers, family members, community leaders, teachers, etc.



The next step is to know what you want these groups to do, and to say it in a way that's compelling, interesting and motivating.

This will be your key message. It should:

- be short, concise and clear;
- tell the audience what action is needed and why they should take it;
- convince them of why it is to their benefit to do it, or their detriment not to do it.

Remember that there are key messages that have been developed about TB, such as those for World TB Day, and your messages should incorporate and promote the global messages. For global messages and most recent, official country-level TB data, please refer to web site resources at the end of this document.



For example:

The key message to people with TB symptoms might be: "You must come in for diagnosis and treatment because you may not know you're sick but you are likely infecting your loved ones, too".

How can the media help?

The first thing to remember is that the media is in the business of attracting viewers, web users, listeners or readers with interesting stories. While journalists and the media often do want to promote good causes, they are, first and foremost, driven to provide information their audiences want to consume.

That said, the media certainly can help you spread your key message and reach your target audiences. They have broad reach and tremendous influence in many cases. They can sometimes set the public agenda and educate on issues.

But it's not enough that you think something is important for the media and the public to know. You must attract the media who in turn will have to 'sell' it to their audiences. You have to provide a good story their audience will be interested in:

compelling, important to their lives, and newsworthy.

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Do you have organizational buy-in?

It's an important factor that's too often overlooked. Now is the time to make sure of this, and to convince those who are unsure of the value of media outreach.

- Is everyone in your organization, who needs to be, comfortable and on-board with going to the media?
- Do they agree on the plan and the approach, and perhaps even the resources that are needed?

Listen to valid concerns and address them now.



Who will speak to the media?

Is there a policy in your organization about who speaks to the media, when and when not? Too often this is a haphazard practice that can lead to problems if people are inexperienced or are saying different things to the media at different times.

Get a clear media policy in place:

- Who is authorized to speak?
- What happens when the media call?
- Who can issue press releases?
- Does your spokesperson need some media training?

6 WORKING WITH THE MEDIA | Develop α clear plan



How the media work <mark>&</mark> what they want

Reporters and editors are asking themselves: 'Who cares'?

Those who work in the media will tell you they just 'know' a good story when they see it. It's a 'gut' reaction.

What they're asking themselves really is: 'Who cares?' That means: will our audience be interested by this news, affected by it, shocked by it, entertained by it? Who will read, watch or listen, and why?

What are the criteria used to decide what's news?

There are some fundamental News Values that apply to selecting what will be in the newspaper or on the TV and radio.

They include such elements as:

- **new:** fresh information, current event or announcement,
- **local interest:** the closer to the audience the more relevant,
- **impact:** who is/will be affected, how many, how big,
- **b** shocking, entertaining: unusual, interesting, fun,
- **celebrities and important people:** always attract attention.



What's a 'good story'?

A good news story incorporates news values but also has a familiar storyline:

conflict and controversy: especially involving important people or institutions,

> myths and old stories: good guy vs bad guy, big guy vs little guy, overcoming adversity,

problems and solutions: a big problem affecting much of the audience and a new solution or discovery to solve it.

human interest: stories about real people we can relate to.

Make sure your news story does not backfire on you. Shocking news may scare people away and may further stigmatize TB. Instead, consider focusing on something positive, such as portraying a picture of an XDR-TB (extensively drug-resistant TB) patient before and after successful treatment. Such real-life examples have greater impact on the general public.

EDIA | How the media work & what they want

Case study | Launch of an initiative to accelerate MDR-TB control

In October 2006, the WHO XDR-TB Task Force recommended that WHO and partners urgently evaluate new technologies for the rapid diagnosis of multidrug-resistant TB, or MDR-TB and deploy them in the field as soon as possible. A 2007 World Health Assembly resolution called on WHO to support Member States in developing laboratory capacity for rapid drug-susceptibility testing (DST), develop consensus guidelines for rapid DST methods and appropriate measures for laboratory strengthening, and to mobilize funding.

The Stop TB Department at WHO therefore reinforced its laboratory-strengthening team and assisted the Foundation for Innovative New Diagnostics (FIND) to carry out field evaluations of line probe assays (LPAs), a new, rapid, molecular DST technology.

Stop TB subsequently drafted a WHO policy statement with recommendations to Member States on the use of LPAs. The policy statement was endorsed by WHO's Strategic and Technical Advisory Group for Tuberculosis.

In the meanwhile, UNITAID, the Stop TB Partnership's Global Drug Facility and FIND Diagnostics reached an agreement to implement a new initiative, funded by UNITAID, aimed at scaling up MDR-TB diagnosis and treatment. The plan called for rollout of the line probe assays.

Lessons learnt | Why it worked for media coverage

This story was relevant to many reporting areas - health, development and science reporters - the 'breakthrough' was brought about by the coming together of all partners to speed the response.

The four partners had a good list of useful and relevant technical documents for journalists, including a feasibility field study carried out in South Africa, WHO policy statement, expert group report, information document on strengthening of laboratory services in Lesotho, and a four-page background information document on the initiative itself.

This was a very clear news message - it needed no interpretation of data or trend analysis. All partners had a clear contribution to make, reflecting their expertise and role.

See related press release on next page



Press release | New rapid tests for drug-resistant TB for developing countries

30 June 2008 Geneva

People in low-resource countries who are ill with multidrug-resistant TB (MDR-TB) will get a faster diagnosis -- in two days, not the standard two to three months -and appropriate treatment thanks to two new initiatives unveiled today by WHO, the Stop TB Partnership, UNITAID and the Foundation for Innovative New Diagnostics (FIND).

MDR-TB is a form of TB that responds poorly to standard treatment because of resistance to the first-line drugs isoniazid and rifampicin. At present it is estimated that only 2% of MDR-TB cases worldwide are being diagnosed and treated appropriately, mainly because of inadequate laboratory services. The initiatives announced today should increase that proportion at least seven-fold over the next four years, to 15% or more.

"I am delighted that this initiative will improve both the technology needed to diagnose TB quickly, and increase the availability of drugs to treat highly resistant TB," said British Prime Minister Gordon Brown, who helped launch the Stop TB Partnership's Global Plan to Stop TB in 2006 and whose government is a founding member of UNITAID. "The UK is committed to stopping TB around the world, from our funding of TB prevention programmes in poor countries, to our support of cutting edge research to develop new drugs."

In developing countries most TB patients are tested for MDR-TB only after they fail to respond to standard treatments. Even then, it takes two months or more to confirm the diagnosis. Patients have to wait for the test results before they can receive life-saving second-line drugs. During this period, they can spread the multidrug-resistant disease to others. Often the patients die before results are known, especially if they are HIV-infected in addition to having MDR-TB.

The initiative comes just one week after WHO recommended "line probe assays" for rapid MDR-TB diagnosis worldwide. This policy change was driven by data from recent studies, including a large field trial -- conducted by FIND together with South Africa's Medical Research Council and National Health Laboratory Services -- which produced evidence for the reliability and feasibility of using line probe assays under routine conditions.

"Five months ago, WHO renewed its call to make MDR-TB an urgent public health priority," said WHO Director-General Dr Margaret Chan, "and today we have evidence to guide our response. Based on that evidence, we are launching these promising initiatives."

Press release | New rapid tests for drug-resistant TB for developing countries

Two projects

NTP Mexico

The new initiative consists of two projects. The first, made possible through US\$ 26.1 million in funding from UNITAID, will introduce a molecular method to diagnose MDR-TB that until now was used exclusively in research settings. These rapid, new molecular tests, known as line probe assays, produce an answer in less than two days.

Over the next four years - as lab staff are trained, lab facilities enhanced and new equipment delivered - 16 countries will begin using rapid methods to diagnose MDR-TB, including the molecular tests. The countries will receive the tests through the Stop TB Partnership's Global Drug Facility, which provides countries with both drugs and diagnostic supplies.

As part of the project, WHO's Global Laboratory Initiative and FIND will help countries prepare for installation and use of the new rapid diagnostic tests, ensuring necessary technical standards for biosafety and the capacity to accurately perform DNA-based tests. One country, Lesotho, is already equipped to start using these tests; Ethiopia is expected to be ready by the end of 2008. The tests will be phased in during 2009-2011 in the remaining 14 countries.

Under a second, complementary agreement with UNITAID for US\$ 33.7 million, the Global Drug Facility will boost the supply of drugs needed to treat MDR-TB in 54 countries, including those receiving the new diagnostic tests. This project is also expected to achieve price reductions of up to 20% for second-line anti-TB drugs by 2010. All the countries receiving this assistance have met WHO's technical standards for managing MDR-TB and already have treatment programmes in place. Some will use grants from the Global Fund against AIDS, Tuberculosis and Malaria to purchase the drugs.

MANAKA

TBCAP Afghanistan Project

provided by UNITAID, these projects are expected to produce significant results in diagnosing and treating patients as well as reducing drug prices and the costs of diagnosis. These efforts illustrate the way in which innovative financing can be deployed for health and development,...

Through the US\$ 60-million support

...said Philippe Douste-Blazy, Chairman of UNITAID's Executive Board.

How can we put that to work to help us reach our audience?

Once you've got your target audience and your key message clear, the next step is to craft them into a news story that incorporates the news values and good story elements to attract the media.

One important way is to explain a complex issue through a story of a real person or people and how they are affected. This is the 'story' element to news.

If you can provide that human element, rather than just institutional processes or scientific data, then you will make the information much more interesting to the media.

For example:

You could hold an interesting local event at a clinic to which people who have not been tested before are invited to come.

You could find a family in which the mother went for testing, found out she had TB but was able to get treatment before her children were infected.

If you have information about data, try to put it in terms of real people: if the incidence of TB in the population has dropped 0.5% in the past year, how many actual people does that represent?

How do we contact or attract the media?

The media have certain tools, conventions and practices. Once you know how they work you can put them to work for you and your organization.

1 Written communications can attract the media:

- Press release: This is the most common vehicle to attract media attention. It can announce discoveries, major initiatives, upcoming events, important decisions, and so on. Make sure you have something newsworthy and compelling to say in your press release, and that you make that clear in the very first paragraph.
- Opinion pieces or columns by experts: These are written about an issue by a prominent person or expert, and are offered to the newspaper for publication. It is an effective way to get your voice heard and many smaller newspapers are eager to have a wide variety of viewpoints in their pages.
- Features and 'soft news': Often our stories don't perfectly fit the mould of daily news. The challenge of explaining the complexity of TB, its treatment and its eradication can be difficult to explain in short news items. It is, however, material for very good feature articles or stories for newspapers, magazines, TV and radio. In news jargon, 'hard' news covers day-to-day events, while 'soft' news consists of longer pieces with more human interest.





2 Events and face-to-face meetings will also engage the media:

- News conferences: Having reporters attend to hear an announcement or ask questions on an important issue constitutes a news conference. However, be sure it's worth their while to come out and be well prepared with good speakers who are informed on the issue and know your key messages. A press kit with your announcement or news release and some background information is helpful for journalists. Let the media outlet know about the news conference a week in advance.
- Media event or photo opportunity: Holding an event aimed at attracting the media is an effective way to get your story out. It can be a speech to announce new data or new initiatives, or the opening of a clinic or laboratory facility, for example. In organizing a media event, it is important to think about pictures and TV coverage as you will likely attract cameras. Be sure the media know in advance, and remind them with an email or a call the day before or the morning of the event. Be sure to have a spokesperson available to answer questions or be interviewed.
- Media availabilities: you can organize breakfast or lunch meetings between senior officials and your local media to discuss more informally the general issues. You can arrange media tours of TB clinics, labs or locations.
- One-on-one interviews: you can set up face-to-face or phone interviews with senior officials or spokespeople. If someone important is visiting your organization, perhaps arrange for that person to meet with local journalists.
- Media training: you can organize a training workshop for journalists on health reporting, focusing on key TB issues. Training can also include site visits, where you take the journalist to health facilities to show and explain how patients are diagnosed and treated.

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Case study | Engaging the media in Egypt



footballer). Ministry officials and NTP staff continuously conduct interviews with newspaper editors and radio programmes.

In addition to these high-profile and continuous activities, the Ministry of Health with the Ministry of Information organized a meeting to discuss the role of media in raising health awareness, and about TB in particular. Senior media representatives from local television channels as well as health officers attended the workshop, which facilitated an open discussion on the role of mass media, such as TV, in raising awareness of health issues. They discussed the important responsibility of the media to provide unbiased information based on facts. Issues such as correct messaging to avoid over- or underestimating the magnitude of the TB problem and to avoid the creation of stigma were also discussed.

Other activities to better engage the media include a workshop held with Directors and programme designers for satellite and ground TV channels. Participants learned about the ability for the media to help in changing people's misconceptions about TB. They also discussed how the media could disseminate correct messages about TB and the importance of early detection.

NTP has recently collaborated with a TV Director to prepare three TV drama episodes featuring TB. The three episodes will aim to convey TB as a disease that can affect anyone, but that it is curable. It will also address the issue of what people need to do if they have symptoms and the role of good family and community support.

Two additional satellite TV spots, about TB symptoms and treatment opportunities, were produced in collaboration with the health channel of the Ministry of Health.



44 ... understand the value of engaging the media... 77



3 Attract the spotlight when the media are already interested in TB:

- 'Hooking' the news: This is a common practice in media relations. When the media are already focussing on an issue relevant to yours, you can provide them with information about your organization or work that's relevant, or offer an expert viewpoint on the matter. A short press release with your organization's viewpoint or expert opinion may well lead to your organization's message included in an existing or ongoing news story.
- Making global news local: When there is a global announcement about TB, you will attract media attention if you can provide information that makes it more relevant for the local or national media's audience. Take the opportunity of global news to send out a local/national media release with your piece of the bigger story.



Case study | Media outreach during HIV/TB Global Leaders' Forum

The HIV/TB Global Leaders' Forum, held at UN Headquarters in New York on 9 June 2008, brought together for the first time heads of government, public health and business leaders, heads of UN agencies and activists to seek a common way forward on confronting the HIV/TB epidemic. The three-hour Forum also served to bring the issue of HIV/TB to the global spotlight and to get world leaders to publicly commit to doing more to fight the deadly co-epidemic.

Active media outreach prior and during the Forum was key in ensuring the success of the Forum. The event itself, the topic and the list of participants were sufficient to gamer media interest. But further outreach achieved wider coverage of the event, and succeeded in highlighting HIV/TB in countries that are most affected by the deadly combination.

In addition to the media advisory, note to the media and key messages, a simple opinion piece template with key information was drafted and disseminated to country contacts for adaptation and placement in country media outlets. As a result, 14 opinion pieces, each adapted for the specific country context, were placed on the issue of HIV/TB.

The event was also covered in the press both globally and at the country level, showing that global news can easily be adapted and made into locally-relevant news.

Example of Op-Ed published in The Daily Star (Bangladesh)

TB/HIV co-infection | Bobby Ramakant , Recipient of World Health Organization (WHO)'s Award for the year 2008

On June 9, for the first time, governments, public health and business leaders, heads of UN agencies and advocates are coming together at United Nations (UN) Headquarters to acknowledge addressing HIV/TB as an urgent priority. This first HIV/TB Global Leaders' Forum, convened by Dr Jorge Sampaio, the UN Secretary-General's special envoy to stop TB, seeks to galvanise leadership at all levels.

The 2008 "Anti-tuberculosis drug resistance in the world" report and the 2008 "Global tuberculosis epidemic report of World Health Organization (WHO)" clearly mandates much heightened urgency in responding to the TB-HIV co-infection.

Bangladesh continues to have the 5th highest TB burden in the world. TB is the leading cause of death among people living with HIV (PLHIV). Approximately one-third of the nearly 40 million PLHIV are also infected with TB. In high TB and HIV burden settings, up to 80% of TB patients may be co-infected with HIV, and half of AIDS-related deaths are caused by TB.

Without proper treatment with anti-TB drugs, approximately 90% of people living with HIV die within two to three months of becoming sick with TB, even if they receive antiretroviral

Worldwide, nearly a quarter of a million people die from HIV/TB co-infection each year.

This dual threat is a barrier to keeping people healthy and productive, and impacts povertyreduction plans and the broader development agenda. However, adequate treatment of TB in PLHIV can prolong their life by at least two years.

HIV weakens the immune system and makes it more likely that latent TB infection will progress to active TB disease. PLHIV are up to 50 times more likely to develop TB over their lifetime.

In many countries insufficient laboratory capacity to test drug resistance is a serious impediment in scaling up TB programmes. Developing laboratories to provide rapid diagnosis of anti-TB drug-resistance, particularly for PLHIV, is of utmost importance to improve TB responses.

Many countries, including Bangladesh, are making impressive gains in treating people living with HIV, but this investment and progress is squandered by a preventable and curable

New strategies and tools are urgently needed to tackle the challenge of TB/HIV co-infection. WHO-recommended collaborative TB/HIV activities must be accelerated, and research stepped up to deliver a new generation of effective anti-TB drugs and diagnostics to keep co-infected people alive. Closer coordination between national TB and HIV programmes and services is vital.

How can we maximize the impact of new forms of communicating, like the Internet?

The media, like the world, are moving very rapidly towards the Internet as a major source of gathering and disseminating information. This has resulted in a blurring of the lines between the media: newspapers carry TV and audio clips on their web sites, while TV outlets reprint their stories on theirs.



It means that a successful news source - us - must also have information readily available on the web, and provide information in a format that is web-friendly.

The good news is that this is a very efficient and fairly cost-effective approach. Keeping your web site up to date with fresh information, current data, new announcements, and all press material such as statements, releases, photos, factsheets, etc. is relatively easily done.

Once journalists and reporters learn that your web site is a reliable source of up-to-date information, you can expect them to come back for more. Be sure they're aware of your web address by including it on all printed materials. Beware, though: an out-of-date web site will do immeasurable damage!

The Internet is also providing new formats for communicating, such as blogs and podcasts. These are effective ways to reach your audience directly as well as provide journalists with ideas for stories and information for their news coverage.

...an out-of-date web site will do immeasurable damage!





The practice of media relations is about developing a positive on-going relationship with the media. This will pay off when you want to attract their attention to an issue, or need to defend your organization in a difficult new story should that situation arise.

How do we go about developing relationships with the media?

The first step is to identify who they are and develop a Media Contacts list:

- Start a list of the media newspapers, radio, TV, internet in your city, region and/or country. Find out the names and contact details of their news and feature editors, and who best to contact with news releases.
- Pay attention to the news and see which reporters have shown interest in the issue of TB, or are identified as health or development reporters.
- Keep a list of any journalists and reporters who have contacted your organization or attended events you have held.
- Find out if there is a journalists' association or club with members' list.

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How do we cultivate relationships with the media?

Reporters and journalists are keen to develop relationships with trustworthy and reliable sources of news and information.

Remember, though, they are not your 'friends', nor your 'enemies'. They have a job to do which is to gather accurate, balanced news. You have a job to attract their attention and provide accurate information. This is the 'dance' of media relations.

- Be a trustworthy and reliable source: The best way to develop a strong, sound relationship is to be a reliable source who can be trusted to tell the truth and provide accurate information. When a journalist calls, reply promptly. It is important to take a bit of time to collect the correct information, but be aware that journalists usually work on tight deadlines and can't be kept waiting long. The news opportunity may be missed if you delay.
- Share information: When you have relevant information, new data or a good story, share it with reporters with whom you have developed a professional relationship. They will appreciate a good 'lead' on a story, and come back for more.
- Sell an event or good story line: It is good practice to contact reporters to 'pitch' or sell an event, a story or a news conference. A follow-up email or telephone call to encourage them to cover your story can prompt a response. Don't overdo it and annoy them, though!

How do we deal with the media when the story about our organization or the issue of TB is negative?

The worst thing you can do in this situation is avoid, ignore or try to shut it down. "No comment" or silence is usually interpreted as an admission of guilt.

You must face the issue openly and candidly. But do take the time to get your information straight and know how you want to respond.

- Understand the issue clearly.
- What is the role of your organization?
- If there is guilt or a mistake made, it is
- always better to be honest.
- Say what's going to be done to rectify it.
- Do NOT try to avoid or cover it up.

Decide who should reply – the Communications Officer? A Technical Officer with expertise in the issue? Senior management? Ensure that person knows your organization's position on the issue clearly and can communicate it effectively.

Check that you are on the same page with other TB organizations about your message if this is an issue that goes beyond your own organization. It's important that everyone is saying the same thing. Overall, stick to the facts and don't be drawn into hypothetical discussions or speculation.



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Rules of engagement with the media

The media considers everything you say as information they can use, so be aware of what you might say even when not being 'interviewed'. It's all open to use, according to the rules of engagement.

The exception to this rule is if you make a prior agreement with the journalist:

'Off the record' means what you are about to say is not to be quoted or used in the news story. **Beware:** this is dangerous territory so don't go there regularly. **'Not for attribution'** means the store the store of the stor

'Not for attribution' means that the reporter can use the information but can't say who said it. Again, shaky territory.

Bottom line: Think before you speak and be aware at all times of what you say.



Being interviewed: staying comfortable & confident

Entire books, courses and training programmes have been devoted to this subject. This will be a short-course version, but if you are going to be interviewed by the media regularly you should tap into broader resources.

I have an interview scheduled with a reporter. How can I prepare?

The best thing you can do is your homework:

- Know what the reporter wants before you do an interview. Interview the reporter before he or she interviews you. What does he want to talk about? What information is he or she looking for? Can you assess whether he or she has an 'agenda' – wants to paint the issue or your organization in a certain way?
- Take time to prepare, gather information and facts: Once you know what the journalist wants, be sure to have that information to hand and be comfortable with it yourself. Find out the latest facts and what your organization's position is on the subject. It is good practice to ask for a few minutes for this even if a reporter calls you and wants an immediate interview over the phone.
- What format will the interview take radio, TV, print? Print interviews have little or no equipment, how you look is not important, but they may be longer and more in-depth. TV or radio will involve technical equipment and that may throw your concentration. They will likely be shorter interviews, however. Find out the time of the final interview for TV or radio, it will help you keep to the limit.





How do I ensure that I get across what I want to say?

The best way to ensure that is to know what you want to say before you say it:

- Know your message: be clear on your key message, and think of interesting, compelling ways to say it and talk about it. Remember how the media like stories that relate to real people.
- ▶ Have 3 or 4 key points to support your message: Have some evidence, anecdotes or illustrative examples that support the message.
- Practice saying it concisely and clearly: Run through your message in your head, and try it out on coworkers to get their response. Keep it short and tight.
- Make your case compelling and passionate: Even the driest issue can be told in a way that grabs attention. If you feel passionate, the audience will hear that and respond.



I am concerned that this will be a tough interview and I won't feel in control.

This is part of the 'dance' of media relations as well. The journalist will want to control and direct the conversation, but you need to do your best to keep it on your message track.

Here are a few hints for achieving your goal:

- Say what you know, but not more: Don't be drawn into saying things you don't want to say, or don't know about. Don't speculate or go beyond your expertise. Just politely defer the question and answer what you DO know.
- Try bridging to your answer: Bridging is all about getting the dialogue back to where you want it to be: on your message. Bring your response back to what you want to say by gently steering it there. You can use phrases like, 'That's an important question, but first let me say...', or, 'What really needs to be addressed is....' This takes some practice but is very effective. Most politicians have this perfected. Watch them and learn.
- Stay calm, don't be provoked: If the interview gets heated, you must stay cool. Do not appear angry or frustrated, that will only make things worse. Just breathe and smile they are powerful ways to calm yourself even when you don't feel it inside.
- Relax and be yourself: Possibly the hardest thing to do when you're nervous, but if you know what you want to say, it's easier to feel relaxed.
- Think through the answer to 'the worst possible question': What is the one thing you hope the reporter doesn't ask? Better to think about that before the interview than during it. Have an answer prepared. If it comes up you'll be ready and if it doesn't, the interview won't seem so difficult.

Have a co-worker interview you and tape or film the interview. This type of pre-interview training will help you identify your weaknesses, find ways to improve your performance and gain further confidence.

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Evaluate & assess your **Success**

How can we know if we were successful with our media efforts?

Evaluation of media relations is always challenging. Really, ultimate success would be measured by whether your goal was reached. But was it a media story that got your target audience to act? How could you know that for sure?

You could conduct in-depth monitoring and evaluation to find that out, and sometimes that's important and worthwhile, but also challenging, expensive and time-consuming.

Most often, then, we are left to evaluate whether the media responded to our efforts, and how they did. This is important information as well so you can improve your next media effort.

Here are some components to consider assessing:

- Did the media pick up on your news offerings? How many stories were written and by which media outlets? A tally of number of media gives you a picture of the interest in your issue. It also helps to collect the names of the media for your contact list. You can set up your own collection system by doing a search of onllne news sources, for example, or hire a media clipping service to do the work for you.
- Did you get your message and main points across? How does the text align with the message you wanted to get across? Did they clearly understand it and convey it? Was it muddled, or did they focus on something else that we said?
- What could you do differently next time? What are the lessons learned to apply to the next effort? Did the media respond? How did they respond? Was our message clear enough? Were there things we did well, or poorly, that we want to address in future?
- Share successes to build support for media relations. It is important that your colleagues know about your media successes, so share your evaluation. It will bolster support for future efforts and may win over some who are unsure or unsupportive.

Web site resources

World TB Day messages

http://www.stoptb.org/events/world_tb_day/

Latest official TB data | http://www.who.int/tb/country/en/

Public and media relations for non-profits | http://www.managementhelp.org/pblc_rel.htm

Tips for media relations, media events and media releases (including a sample press release) | http://tenant.net/Organize/media.html

How to write a press release

http://209.85.129.132/search?q=cache:CLxzHSLdigsJ:democracy. mwcc.edu/docs/sample_pressrelease.pdf+Nonprofit+Press+release&h I=en&ct=clnk&cd=9&gI=ch

Anatomy of a press release

http://prtoolkit.prnewswire.com/file.php/85/NewsRelease_anatomy.pdf









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http://www.who.int/tb/en/

www.stoptb.org