



Alliance of Academic Health Centers International

# LEADERSHIP PERSPECTIVES

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COMMUNICATING SCIENCE  
TO  
PATIENTS, PROFESSIONALS, AND THE PUBLIC

2023// ISSUE 4



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# COMMUNICATING SCIENCE TO PATIENTS, PROFESSIONALS, AND THE PUBLIC

In this fourth in a series of commentaries, three leaders at academic health centers from the United States and abroad bring their perspectives and guidance on what they consider an essential element of the academic mission of delivering excellent health care: effective communication. The commentaries offer valuable insights to overcoming messaging hurdles. Each author emphasizes the unique resources and capacity of academic health centers to optimize communication essentials, including building intentional, designed curricula to enhance communication skills; tapping into the accomplished expertise of their scientists and health care providers to strategize steps and deliver immediate and helpful information in times of crisis; and developing programs that advance strong, trusting relationships with the media and support accurate knowledge acquisition by the media.

## Featured Commentaries

Michael F. Collins, MD  
Chancellor, UMass Chan Medical School  
Senior Vice President for the Health Sciences  
University of Massachusetts

Mantosh Dewan, MD  
President and  
SUNY Distinguished Service Professor  
State University of New York Upstate Medical  
University

Prof. Aldy Safruddin Rambe, MD  
Dean of Faculty of Medicine  
Universitas Sumatera Utara  
Indonesia





## Michael F. Collins, MD

Chancellor, UMass Chan Medical School

Senior Vice President for the Health Sciences

University of Massachusetts

UMass Chan Medical School is the Commonwealth of Massachusetts' public health sciences campus, comprising three graduate schools — the T.H. Chan School of Medicine, the Tan Chingfen Graduate School of Nursing, and the Morningside Graduate School of Biomedical Sciences — with more than 1,400 students, 600 residents and fellows, a Nobel Prize-winning biomedical research enterprise, two unique business units, and more than 6,000 staff across our organization. What sets us apart is *how* we approach fulfilling the mission of academic medicine. We advance together in a deliberate way that recognizes, values, and celebrates collaboration as our shared superpower that guides our training of the next generation of physician, nursing, and scientific leaders; our clinical trials and groundbreaking research; and our efforts to help make our communities healthier while helping us attract some of the brightest minds from around the globe.

Central to our mission is enhancing public understanding of health and science and communicating the value of all we do — challenges for which no single approach suffices. Let me offer two examples of a robust multifaceted strategy that encompasses internal ambassadors and external stakeholders.

In 2014, UMass Chan initiated an annual program we call a media fellowship, which invites journalists to apply to spend two days on our campus, immersed in learning through a series

of presentations, conversations, and interactive opportunities featuring our faculty, students, and leadership. While session topics change from year to year, each program offers journalists insights into UMass Chan's strategic opportunities and challenges, enables our faculty to share their expertise and often become trusted sources, provides our students a meaningful chance to showcase their inspiring idealism, and allows our media relations team to establish and deepen connections with influential journalists. As part of the 2023 fellowship, the mother of a toddler diagnosed with a rare disease spoke firsthand about what it means to partner with our gene therapy researchers to advance the shared goal of unlocking a treatment or cure. The 2023 program concluded with our media fellows witnessing one of the happiest days of the year on any medical school campus — Match Day.

Over the course of six annual fellowships, UMass Chan has hosted 42 distinguished journalists from outlets including *The Boston Globe*, *Time Magazine*, *Wall Street Journal*, NPR, and multiple network TV affiliates. It is an integral component of our media strategy to raise the profile of UMass Chan. The 2023 fellowship directly resulted in at least 15 pieces of earned media coverage.

A second example of UMass Chan's collaborative mindset in action is the way in which we developed the new "Advancing Together" brand, which beautifully captures the special spirit that has always defined our medical school and the

value proposition we offer to our learners, faculty, staff, advocates, partners, and communities. The September 2023 launch followed nearly a year of quantitative and qualitative research that called on our students, faculty, alumni, peers, and others to lend their input as we sought to define what makes UMass Chan unique. Loudly and clearly, we heard that it's not just *what* we do but *how* we approach the work — collaboratively — that has made us a magnet for talent and contributed greatly to our growth and success.

The concept of “Advancing Together” is particularly relevant at this moment, as academic medicine faces increasingly complex and interconnected challenges including the integration of technology, emerging diseases, financial strain, and the evolving needs of diverse patient populations. These challenges necessitate a collaborative approach that transcends individual disciplines and ensures that each member of our community contributes their unique expertise.

Time and again we have found that partnerships — in these instances with our colleagues, learners, and journalists — hold important keys to conveying the importance of science, nursing, and medicine.

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## Mantosh Dewan, MD

President and SUNY Distinguished Service Professor  
SUNY Upstate Medical University

When the nation shut down and darkened from the pandemic declared by the World Health Organization on March 11, 2020, the spotlight shone brightly on academic health centers (AHCs), especially those with expertise in vaccine development, testing research, patient care, and public health. As the only AHC in the middle third of New York state, Upstate Medical University (Upstate) — with colleges of medicine, nursing, health professions, and graduate studies — was fortunate to have robust talent in all these areas.

A major challenge to every aspect of our work was that ever-changing information from around the world about the COVID virus was easily manipulated into a blizzard of misinformation. Managing it was quickly recognized as a high priority that required a concerted, carefully choreographed campaign with three essential components: (1) using highly credible experts from a range of specialties to present scientific updates, (2) deploying them at frequent, consistent intervals, and (3) reaching out via multiple media channels.

We quickly assembled a team of experts and strategies:

- Dr. Frank Middleton developed the best saliva COVID test in the United States, a test so sensitive that 12 samples could be combined. With our partner Quadrant Bioscience, more than four million tests were run. One million such tests were from

60 SUNY campuses across the state, which enabled students to feel safer and allowed campuses to continue in-person teaching.

- Dr. Stephen Thomas was nationally recognized as the lead principal investigator for worldwide clinical trials of the first COVID vaccine by Pfizer/BioNTech.
- Our public health and preventive medicine faculty created an app to collate data from a range of trusted sources (including wastewater samples that only Upstate Medical University was collecting and analyzing in New York state) to provide real-time graphs that identified and explained trends.
- Before the surge of patients began, we tapped the experience of physicians in Wuhan, China, who generously offered best practices for treating patients and protecting staff.
- To ensure that everyone was kept current and responses (e.g., changes in visitor policy) were immediately implemented, Incident Command was created. About 100 people from every area of the AHC met twice a day. Every day, the latest data, assessment, and action items were documented and shared.
- An essential role for Upstate was ensuring

that accurate information and the recommendations our expert team developed every day were communicated both to our internal audience and to our community — and that this was done regularly.

Several key initiatives enabled us to flourish in this outreach:

- Upstate held virtual COVID updates every Friday at noon for our employees. Each session opened with an inspirational quote sent in by staff. A core of senior leaders and high-profile, trusted experts were always present and other specialists were added for emphasis or discussion of a particular topic. They presented a succinct overview of the latest science and COVID's impact on our institution and region. They addressed questions openly and enhanced their credibility by clearly delineating what was not yet proven. Friday updates were very well-attended, must-see forums. They were frequently supplemented with informal, small group discussions — which were especially valuable for addressing resistance when the vaccine was mandated and non-compliance would lead to dismissal. The president and hospital CEO even went so far as to push a vaccine cart through every clinical unit to talk to and vaccinate staff members who were reluctant or too busy!
- As the largest employer in the region, we knew it was particularly important for Upstate to educate and build greater understanding of the COVID pandemic among our 11,000 employees so they could be good ambassadors and teachers in their own communities.
- To reach community clinicians, Upstate used Project ECHO (Extension for

Community Healthcare Outcomes). Its first COVID-related ECHO session, in March 2020, attracted more than 100 medical professionals, representatives from county health departments, and others. Later sessions covered COVID-related epidemiology, transmissibility and safety protocols, adult and pediatric mental health (fear and anxiety, quarantine, burnout), the impact on older adults, rapid implementation of telemedicine, returning to school, and vaccines and vaccinations.

- Upstate also served as a vital, trusted, and credible resource for organizations, businesses, the media, government leaders, and the public on all aspects of the pandemic. Upstate created an online chatbot and hosted a telephone hotline. Both resources connected with more than 62,000 users in the first few weeks, with a high call volume of 880 on a single day. The hotline was staffed by nurses, medical students, and other health care professionals who answered questions from callers about symptoms, testing, exposure risk, whether to seek treatment in the emergency room, and myriad other issues. Upstate also created an online Coronavirus Information Center that offered expert advice on how to safely navigate the pandemic and understand testing information; it also provided quarantine tips and other resources.

As noted earlier, we are the only AHC in the middle third of the New York state — thus, media outreach was another major element of our leading role as COVID communicators. Besides high-profile faculty such as Drs. Thomas and Middleton, we were fortunate to have almost a dozen experts in infectious disease (adult and pediatric) and public health who were well versed in talking to the media about scientific and medical issues. Team members were chosen for

their skill in presenting “breaking news” in clear terms and providing scientific context to explain the possible impact of new findings. Key to our success was always having someone readily available. Dr. Thomas was featured on CNN and was present at almost all the updates the county executive gave every day. A resident in medicine humanized the horrors of the pandemic in an interview with CNN’s Anderson Cooper.

The formula we found the most effective for communicating science included several important elements: arrive at consensus every day, especially when there could be frequent, hotly debated disagreements among experts from a number of disciplines; propagate this consensus and the science behind it as widely as possible; and use as many media channels as possible so that our internal and external communities repeatedly heard clear, consistent, science-based messaging.

COVID illuminated the expertise of AHCs beyond clinical care. All facets of Upstate’s mission had a role in responding to the pandemic, and for that purpose, the public was well served. The pandemic made it abundantly clear that there was a critical need for AHCs to be the beacon for communicating science — especially to challenge and correct misinformation. The renewed distortions spurred by approval of the new version of the vaccine remind us that an AHC’s responsibility to communicate science is critical. Communicating science to patients, professionals, and the public is a worthy addition to the traditional academic health mission of teaching, research, and clinical care.

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## Prof. Aldy Safruddin Rambe, MD

Dean of Faculty of Medicine  
Universitas Sumatera Utara  
Indonesia

When engaging with the multitude of people we meet in the health care professions, it is hardly surprising that one would find a few impediments to effortless communication — even more so when engaging with people from different educational, social, and economic backgrounds.

These impediments can likewise impact doctor-patient communication — a serious problem the medical world must face. A major difficulty impeding effective communication is being able to simplify medical terminologies so that patients understand their health care practitioners and trust them. This is equally true for their families. Without clear and understandable communication, the result can be a more limited relationship that can impact the ease with which patients relate their symptoms and experiences. There needs to be a two-way dialogue so that health care practitioners can provide the best service and patients can receive the best possible options for their conditions.

Understanding that communication is essential to providing the best health care, our institution created a curriculum of classes and skills labs that focused on communicating to other medical practitioners, as well as to patients and their families. We also provide similar training on effective communication to the teaching staff on our faculty. We use several online platforms to enhance the teaching program.

At the peak of the COVID pandemic, there were

serious issues caused by multiple false stories about the nature of the disease and remedies people could use at home. There was fearmongering by some, and others refused to believe that the disease existed — situations that created additional problems. We set up guest lectures and webinars on YouTube to reach a wider audience because face-to-face outreach was not feasible at the height of the pandemic. The webinars were directed not only at professional medical practitioners but at the public as well.

One of the challenges we encountered in continuing education during the COVID pandemic was the limited amount of personal protective equipment (PPE) available for medical students and the subsequent concern of their parents and our teaching staff about transmission of the virus. In response to that concern, we engaged alumni in helping to attain PPE and in communicating directly to the parents, providing reassurance that the faculty would implement safety measures to keep their children safe. We also held routine swab examinations for all medical students, residents, and staff to ensure prompt diagnoses, and we managed isolations to prevent further spread.

For patients in isolation, we created USU Telemedicine, which involved more than 800 volunteer doctors and more than 200 volunteer medical students, in collaboration with Sumatera Utara's government. The program provided online



consultations and daily monitoring. We also sent medications, digital pulse oximeters, and thermometers directly to patients' homes, free of charge to those who resided in Medan.

Communicating proper education to all patients about the importance of keeping themselves safe by using proper PPE and regulating screening, both for in-patients and out-patients admitted to the hospital, minimized the spread of the pandemic. This is a practice we still carry out today: clear and transparent communications to help protect the health and well-being of patients and medical practitioners alike.

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