

Networking: Some Practical Suggestions

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(TL) I want to talk briefly about networking and how it fits into the context of European Health Journalism, using my own experience about networking and how I got here.

Five years ago I met John. I didn't know John 6 years ago, I hadn't heard about anything in health journalism in Europe. It was way off my horizon. I met John at an AHCJ conference in Seattle. We got to talking. He was telling me about the courses he was teaching in health journalism at Coventry. I was telling him about some of the teaching I was doing and the more we talked the more we realised we had a lot in common and that maybe some day we ought to try to organise reporters on both sides of the Atlantic.

Nothing came of it for a year or two and then a couple of years later John came back to the USA for another AHCJ meeting and told me he was hatching the first conference that we had 3 years ago in Coventry. I helped John with a little bit of the thinking that went into that conference. At that conference I met Amelia.

I didn't know Amelia before either. We got to talking there about conflicts of interest and what kind of a dogged reporter she is in going after them, and then we were able to continue that kind of networking one night in Athens where the two of us were attending the final meeting of the European Heart Project.

I have to say that 'this networking thing' has been extremely helpful to me and my career in terms of my reporting, in terms of what I know about health reporting and how much it's informed what I can write about, and therefore inform American audiences.

I would strongly urge that networking be one of the takeaways from the *First Do No Harm* conference. Amelia and I have been talking about how we can further that and I'm going to throw out a few suggestions and tell you of a couple of projects that I have going in Canada. I should say that my Canadian ties also go back about 10 years when Noralou Roos called me when I still worked for Consumers' Union. She said she got my name and we're setting up this seminar at the University of Manitoba, let's talk about it.

I wondered why the University of Manitoba were calling me. Over the years Noralou and I have more or less kept in touch. A few years ago she was talking to me about a project she wanted to do and whether I had any ideas. The idea for that project led to an opportunity for me in Canada last October. Out of that have grown a couple of other projects that I'm going to tell you about in the form of networking.

We think that the AHCJ experience with networking is really a model that can be used over here. We have a marquee conference every year in a different part of the USA. Hundreds of journalists come as well as PR people and academics and others. One of the main reasons why they come to our AHCJ conference is to network. Of course they come for story ideas and hear the panels. We try to provide

a variety of topics for them to carry home back to their news outlets. But I was saying that if you ask a lot of the people why they are there, it's to meet friends, it's to learn about job opportunities, it might be to learn about a new drug that's being pushed or how do you cover a certain health policy issue. There's a great deal of networking and learning that occurs from that.

One of the most popular things that AHCJ has done is to have a list-serve. Ivan has monitored that list-serve for many years. At one point we tried to have a European list-serve on the AHCJ website. John Lister was in charge of that for a while. I think the experience was that we couldn't get a lot of people, if any, to comment or participate in that list-serve. It may be a function of where it was placed on the side, it wasn't really very accessible and people didn't know about it. It certainly is an idea I think is worth reviving as we have the outgrowth from this conference and figure out what we do next.

Also we think we definitely need a mailing list. I think John is going to produce such a list with our contact information and we can talk to each other about that and then communicate, ask questions. I know I have e-mail not too long ago asking about how they regulate drugs in the Netherlands. I was very interested in whether the Netherlands was going to pay this \$84,000 for Sivaldi. I really didn't understand how the Dutch regulatory system worked. I think by having contacts among all of us we will be able to answer questions for each other and help inform our reporting so when we do write about this very expensive drug we'll know what's happening in other parts of the world about paying for it and if it's being paid for just to use one example.

Of course there is also the idea of a further conference and perhaps John will talk more about that and maybe Amelia will.

I will close by talking about a couple of the projects with Evidence Network Canada (www.evidencenetwork.ca) because I think this will be very valuable to you.

Evidence Network Canada has set up a panel of academics which Noralou talked about that yesterday, that any of you want to talk to academics about how health policy works in a particular country, why there is so much privatisation going on, whether co-insurance is being instituted in some form, this panel of experts that the centre at Manitoba has set up. We got the idea that along with that why don't we put together a panel of journalists? I am in the process now of setting up such a panel and some of the people who are in this room now will be on that panel. Others of you if you are interested, please let me know. We will be able to talk among each other and to draw on the resources from each other in terms of how do we cover particular issues, what are the challenges we face, what kind of pushback are we getting from our editors, and so forth.

The hope is that these two panels, one of academics and one of experts representing different countries, will be able to provide information for reporters who are trying to tell the truth the best they can about their country's health systems and the way they regulate, what's going on in health policy, what the ministries are doing, and so forth.

Lastly, another project that's coming out of the University of Manitoba is the original project that Noralou called me about. Which is how do we cover health policy? Most of the discussion at the

conference today has been on the clinical side of medicine, but there are many parallels to covering health policy as there are with covering the medical side of healthcare. For example, some of the stuff that Barry [Turner] talked about could easily fit in very well if we were going to do a session on how to cover privatisation in the UK or the Netherlands or Romania or any other country.

What we're trying to do is figure out how we can prepare a document. We wanted to prepare a document that would be broad enough and useful enough for reporters all over the world will be able to use to cover many of these issues of health policy in their countries.

Amelia will talk specifically about what she believes the European journalists need.

(AB) I am a member of AHJ in the Italian chapter so I have access to all the material they have. It's a richness I would like to have in Europe too. For example, there is a booklet written by Garry Schwitzer on reporting clinical trials. So you can understand how it works. I would like to ask if this can be used in Europe, translated. Because the difference between America and Europe is that we speak many languages. But I think more or less we understand English so maybe a good database in English would be wonderful from which we could access from every European country.

Then there is the problem of conflict of interest. Every European nation has tried to solve this. For example, I learned from Rinke van den Brinke that in the Netherlands they have a database of conflicts of interest made by the government. But to use it you have to know the subscription number of the doctor to know which conflict of interest he has. In France, they have something like this but it's very different. In America companies are obliged to declare whom they pay and how much they pay them. If we could access the same database as a European database it would be really useful.

If we had a net between European countries it would also be useful. Some time ago I was following an Italian conflict of interest for the Director of a French company, and there I found a Scottish member of the government who was retiring then going back to the company in a 'revolving door' arrangement, and I did not know how to forward this information to Scotland. It's too complicated. If I knew who the journalists in Scotland who could use this kind of information it would be much simpler. And they could give me information about Italy. I think it would be easier.

I am following with a lot of interest the discussion about this in America because when the news comes out in America either the same day or the following day will arrive in Europe. So they ask who is the specialist, what are the problems, who are the experienced journalists to suggest solutions, this is very interesting. Because what you haven't seen, you may see through the eyes of someone else.

Then there is the problem of continuing education. Because I am sure in Italy we have 10 hours of compulsory education a year. But I am sure it will be taken from Big Pharma. In the same way as they have taken the education of doctors. So if we could build a European net, and let us accept because I am here, my friends are here, but the hours we make here which are certainly of study, will not be accepted in Italy as study hours. If we had a European network it would be much easier to have this kind of European education for medical journalists.

We do not speak enough about European agencies, because they are so young in our ideas. I think that for example our food agency which is EPSA in Palma. We know that the experts there are not paid. So 58% of them are paid by industry and these are the people who allow what we eat and we don't. If we had the same pressure from every European country on these subjects I think we could change something. These are my opinions.