Media Column

Media Training for Psychiatry Residents

Lawrence Kutner, Ph.D.
Eugene V. Beresin, M.D.

Medial training for Psychiatry Residents

Academic Psychiatry, 23:4, Winter 1999

Psychiatric residency training programs rarely prepare residents for exposure to the media. Increasingly, however, physicians are called upon to disseminate current knowledge about a wide range of topics pertinent to mental health and illness. The authors describe a model seminar used in a psychiatric residency training program providing residents with skills in effective communication through the mass media. The goal of the seminar is to prepare residents for an important role in public health psychiatry. (Academic Psychiatry 1999; 23:227–232)

Dealing with the media frightened him more than facing loaded weapons—he had training for the latter but not for the former.

—Tom Clancy, Rainbow Six (p. 109) (1)

Mental health professionals are increasingly called upon by the mass media to provide insight and perspective into not only mental illness, but also social trends and behaviors (2). Psychiatrists have the opportunity to play key roles in the dissemination of accurate information to the general public on these matters (3). Despite their intense training in the subtleties of direct patient and family communication, few psychiatrists receive any formal training, either during their residencies or in continuing medical education, in how to be effective communicators through the mass media. One result of this is that many of the people interviewed by the media on mental health topics are not well qualified, but are selected for their media skills. Others have strong content knowledge, but are unable to communicate that knowledge effectively through the mass media. This situation is occurring while both adults and children are receiving increasing amounts of health-related information through mass and especially electronic media (4–6).

To help rectify this situation, we have developed a program that helps give young psychiatrists the perspective, skills, and structured practice they need to become more effective communicators. Since 1991, we have included formal “media training” as part of the “Transition to Practice Curriculum” for child psychiatry and psychiatry residents in the Massachusetts General/McLean Hospital Training Program. We also invite psychology interns, general psychiatry residents, and junior faculty interested in this training.

Our approach is to present this seminar within the context of “public health psychiatry.” The seminar provides students with 1) a context for understanding how different forms of the mass media operate, 2) specific skills for both handling interviews and using the mass media as extensions of their clinical practice or research, and 3) a safe place in which to practice these skills and receive helpful feedback.

The seminar’s goal is to give psychiatrists who have extensive knowledge of mental health issues the specific skills and confidence they need to become more effective communicators of that knowledge to the general public through a range of media (7, 8). While we did not intend or expect any of our students...
to become full-time “media docs,” we were pleasantly surprised to find that a number of graduates have integrated the mass media into their professional careers due, in part, to their experience with this program. One graduate is a frequent guest on television networks, talking about children’s mental health issues, and has created nonbroadcast videotapes for parents and teachers. Another graduate is writing syndicated newspaper articles for a news service. Several have written for popular magazines. Many are occasional interview subjects.

We have experimented with different formats, ranging from single workshops to multiweek seminars. The lessons we have learned from these programs can help training directors and psychology internship coordinators develop plans to provide similar experiences for their students.

**TRAINING ISSUES**

While media training is common among business executives, it is relatively rare within academic medicine. The “Essentials for Graduate Medical Education in Child and Adolescent Psychiatry” (9) require resident experience in teaching community groups about mental health issues. The “General Psychiatry Essentials” (10) require only teaching students in the health professions.

This shortcoming is a missed opportunity, especially in light of the proliferation and growing public dependence upon mass media for both factual information and perspective. Learning how to use those media effectively to educate the public about such issues as normal vs. pathological behavior, treatments, and the workings of the delivery system for mental health care is critical to residency training. Residency review committees should consider basic mass media skills a necessary part of residency education.

When communicating through the mass media, physicians and other psychiatric health care professionals face different legal, ethical, and technical issues than most businesspeople (11). Therefore, we decided that a generic media training program would be inappropriate or even counterproductive. In addition, such a program might seem irrelevant to many of the residents. We needed something specifically developed for doctoral-level researchers and clinicians.

One of the authors (LK) has extensive experience as a journalist covering medicine and child development in major market and network television, as a national columnist for newspapers and magazines, as a radio talk-show host, and as an Internet content provider. The other (EVB) has worked as a consultant to network and cable television programs, as a training film producer, and is frequently interviewed by the media on mental health topics. We used those experiences to develop a program aimed specifically at the needs of physicians and other health care professionals in advanced stages of training.

The vast majority of our students had little or no experience with the mass media. Of those who did—mostly as interview subjects for news programs—many categorized their experiences as “bad.” They complained of being misquoted, of having their statements taken out of context, and of not being able to get across the points they had wished. Two other common themes in their descriptions were that they had felt powerless or overwhelmed. In addition, most of the residents approached the idea of being interviewed by the media in the future with trepidation. They were afraid of how their professional colleagues might react. They worried about making fools of themselves or of coming across as hucksters. They were concerned about whether their comments would be twisted or misused by the interviewer or reporter, resulting in an inadequate, misleading, or overly simplistic presentation. Finally, they were acutely aware that the editing of their comments would sometimes be out of their control. These fears resulted in a considerable amount of anxiety among the students during the initial part of the training. Indeed, one child psychiatry fellow became so anxious as her turn came to participate in a mock radio interview that she started hyperventilating. (She later completed the interview and felt much better.)

**PROVIDING CONTEXT**

The first step in the training seminar is to provide the students with some context for understanding how reporters, talk-show hosts, call-in radio hosts, and program producers think. This includes a “who’s who in the cast,” examining the different roles of producers, reporters, columnists, assignment editors, public relations agents, and others. From this starting point, we explore some of the subtle differences be-