Your Story

And How to Tell it

What I plan to talk about this morning:

- What life is like in a 24/7 newsroom and why we journalists are drawn to "rescue narratives" rather than the incremental success stories of primary care.
- How we tackled the story of America's life expectancy crisis -- and the key role primary care (or a lack of it) plays.
- Some thoughts and strategies for increasing coverage of primary care.

The 24/7 Newsroom

And some of the implications of moving from an advertising- to a subscription-based model

1301 K St NW



The old advertisingbased print model

The Washington Post had the highest "penetration rate" of any newspaper in the country.



HEALTH&SCIENCE

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Our old competitor for (inter)national news:



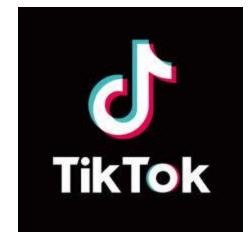














SEMAFOR



BuzzFeed

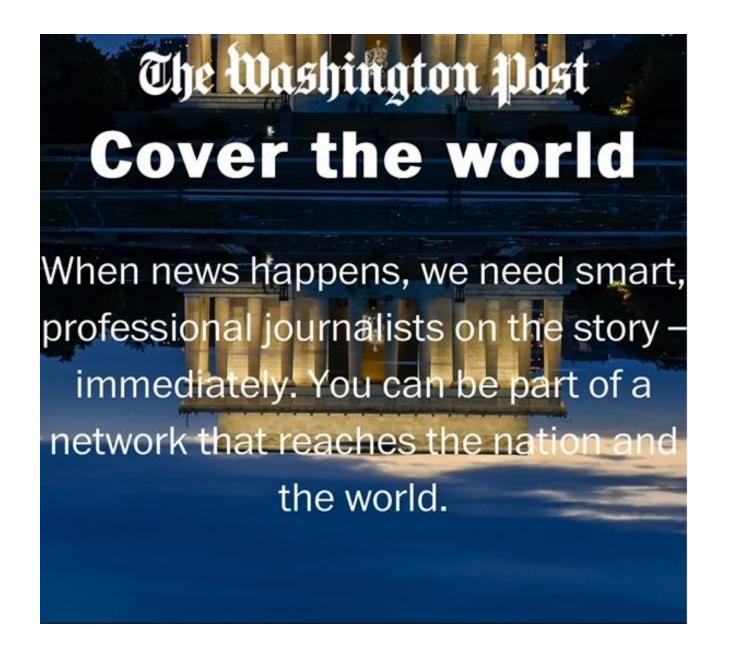




Daily **Mail**

We cover the world

The Post has vetted journalists around the world to help us cover breaking news in a timely and informed fashion.



We deliver new on whatever platform makes most sense





And we track reader data closely

Reporters can check metrics on their individual stories and over time, including pageviews for subscribers and nonsubscribers, as well as registrations.

Editors can access audience data for all the stories their team has published.



We know which stories readers turn to





In medical terms, that translates to a focus on rescue care, not incremental care



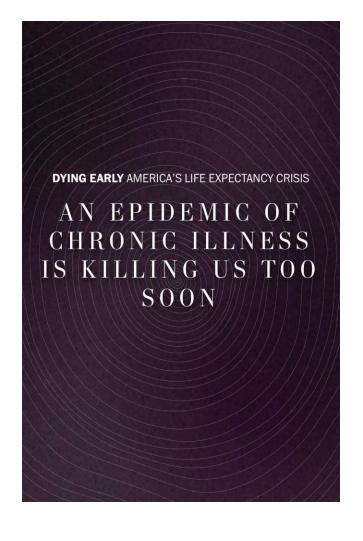


Questions?

Dying Early

How we told the story of America's life expectancy crisis – and the critical role played by (the lack of) accessible primary care

Dying Early



The Washington Post



The data team created a personalized comparative life-expectancy calculator



MORE IN THE **DYING EARLY** SERIES

Calculate your own life expectancy

A woman V living in

Virginia v who is

36 ✓ years old can

expect to live **45 more**

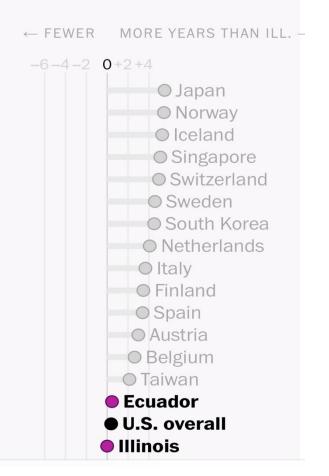
years on average.

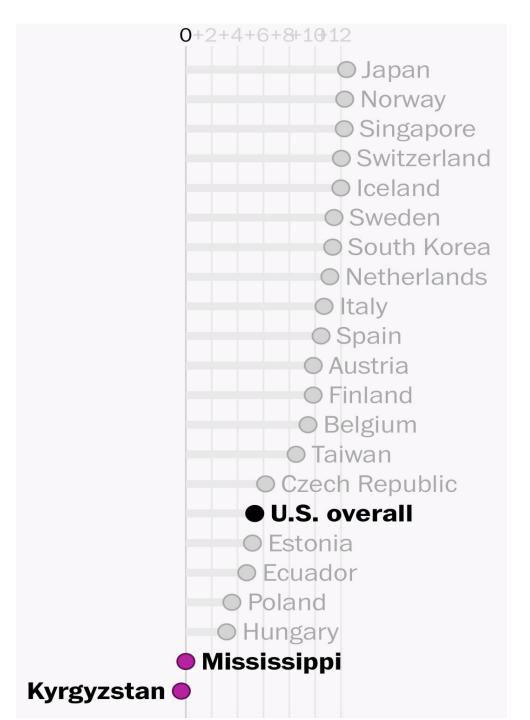
Compare with other countries



Personalize this story *⊆*

A 46-year-old man in Illinois will live for **31 more years** on average. That's about the same as a similar person in Ecuador.





"One thing that is clear to me: The countries that do well nearly always have early and sustained commitment to primary care and public health investment in their communities," said Atul **Gawande**, a surgeon and public health expert who is working to identify and implement low-cost, high-impact health interventions as the assistant administrator for global health at the U.S. Agency for International Development.





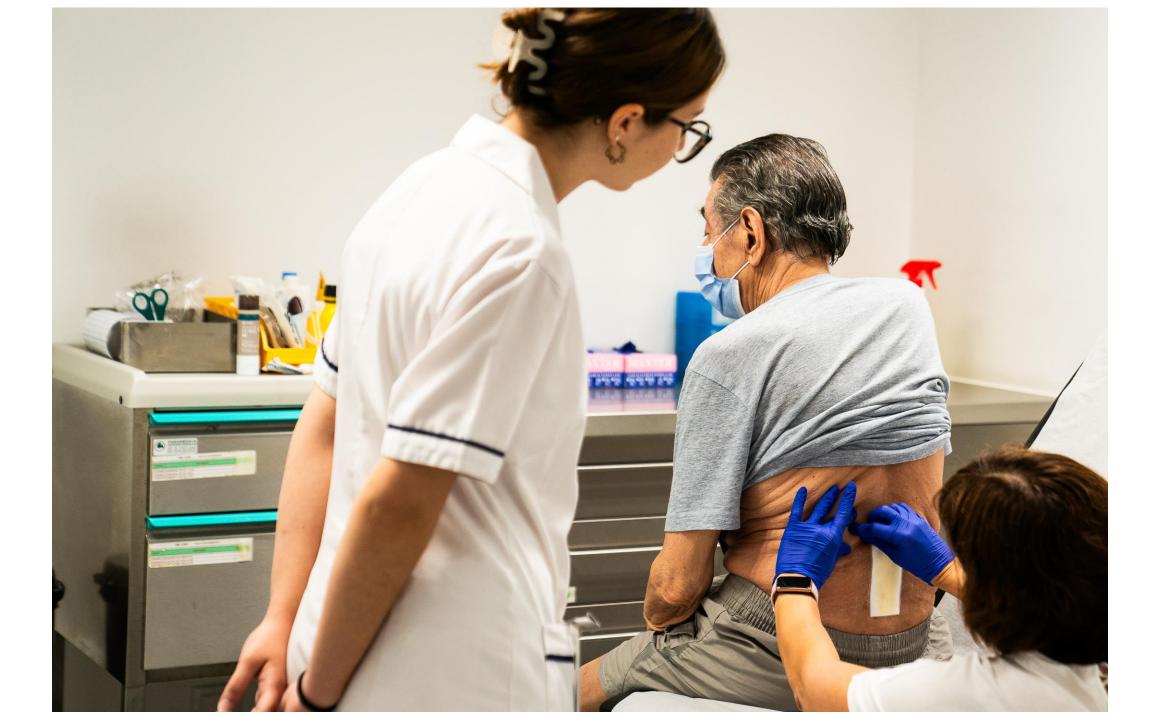




Clínica Benfica













Two sisters – in Lisbon and New Jersey





Dying Early – why America is faring worse than some countries that spend far less on health A TALE OF
TWO SISTERS,
TWO
COUNTRIES
AND THEIR
HEALTH
SYSTEMS

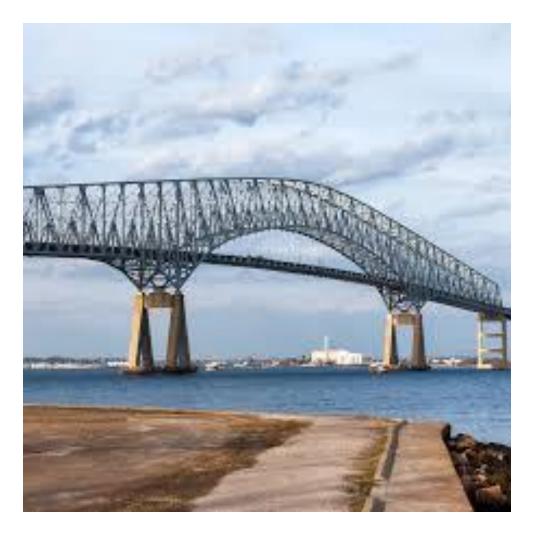


Questions?

Can we change the narrative?

Figuring out strategies to tell the story of primary care

The primary care bridge





Don't be self-effacing. Specialists aren't!

Engage with communications staff at medical institutions and explain why primary care matters

Don't think that a press release from an academic journal is enough.

Yes, you need to consider patient privacy. But many patients are eager to share their stories

Reach out to reporters. We need your help!

Discuss terms with reporters, like "off the record" and "on background."

Your world is changing as quickly as mine





Value-based care



Concierge care

Is this what my new PCP will look like?



We have new ways of telling your stories

NEWSLETTER | THURSDAYS



The Washington Post





Questions?

Special thanks to....

- Asaf Bitton, executive director, Ariadne Labs
- Atul Gawande, assistant administrator, USAID global health
- Bob Phillips, PCP and health reform expert
- Ishani Ganguli, PCP and researcher, Harvard Medical School
- Rachel Hull, NHS respiratory nurse
- Sandy Boodman, author of WaPo's Medical Mysteries
- Shantanu Nundy, PCP entrepreneur and author

Fields like primary-care medicine seemed...squishy and uncertain. How often could you really achieve victories by inveigling patients to take their medicines when less than half really do; to lose weight when only a small fraction can keep it off; to quit smoking; to deal with their alcohol problem; to show up for their annual physical, which doesn't seem to make that much difference anyway? I wanted to know I was doing work that would matter. I decided to go into surgery – **Atul Gawande**, *The New Yorker*