

Do-It-Yourself Dissemination: Efficiently and effectively disseminating your research findings

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Who should disseminate your findings?

It is **your** responsibility as a researcher to disseminate your findings to your stakeholders

Most stakeholders cannot access peer-reviewed publications

We can help you disseminate findings after publication efficiently and effectively.

Steps

Step 1: Check-in with your JHU media office if you think your findings are newsworthy

- Media attention is one of the most efficient ways to broadly disseminate findings, and the communications team can help
- Also check-in with the journal's media office to see if they have interest in promoting the findings

Step 2: If the communications team decides not to issue a research news release, follow the next steps

- 2a. Write your Executive Summary
- 2b. Send the Executive Summary to contacts in your “rolodex”
- 2c. Leverage social media to quickly disseminate findings to stakeholders
 - Twitter is well-suited for this type of communication

Step 1: Contact your media office

Upon acceptance (or near acceptance) of the paper, contact your media office by e-mail and share your findings

For a complete list of JHU media contacts, please go to <https://hub.jhu.edu/media/contact/> and e-mail the contact affiliated with your school/division

If your media office is interested in working with you, **no need to go to Step 2**

Otherwise, go to Step 2

Step 2: Do-It-Yourself Dissemination

- a. Write your Executive Summary
- b. Send the Executive Summary to contacts in your “rolodex”
- c. Leverage social media to quickly disseminate findings to stakeholders
 - Twitter is well-suited for this type of communication

2a. Executive Summary needed?

- Is your paper freely accessible (i.e. not behind a pay wall) and understandable to a general audience?
 - **No** → An Executive Summary may be needed
- Do your stakeholders have the technical knowledge to read your paper and translate it into meaningful change?
 - **No** → An Executive Summary may be needed
- Do you think your stakeholders will have time to read your entire paper?
 - **No** → An Executive Summary may be needed

*If you answer “no” to any of these questions,
an Executive Summary may be needed*

2a. Executive Summary description

This one-page document should:

- Summarize the “take-home message” of your findings
- Clearly lay the most convincing evidence for the message from your paper
- Provide a quote from you
- Acknowledge funders and any conflicts of interest
- Provide contact information
- Provide reference of the full paper
- Maybe provide a visual that is NOT in the paper (e.g. an infographic)
 - Using a table or figure from the paper in your executive summary may violate the copy right agreement you have with the publisher of your paper

2a. Executive summary template

(template provided as a Word doc, example Executive Summary also provided)

- EXECUTIVE SUMMARY
- Whitespace between short paragraphs
- Quotes around your quotation
- Bolding the main message & quote
- Italicize the article's reference at the bottom and provide link

Anything and everything you write in your executive summary could be used by the media

Complete the highlighted text specific to your findings

E-mail to stakeholders - Executive Summary in the body of the e-mail

Subject: Insert a short, concise subject that declares your main finding

EXECUTIVE SUMMARY: Headline you would like to see from your study findings

In a study published in *Journal*, researchers showed that main message of study.

The study showed insert the most specific findings that support the main message. Be very selective about the data you put in this executive summary

The study was conducted among number of people or specimens, study design, justification for the outcome. These findings provide evidence that complete.

The authors conclude insert the conclusions translated into lay language (*ProTip*: review your abstract conclusion before drafting this.

Lead investigator, your name, title, affiliation, comments "Insert one quote that could be used by the media."

This study was funded by insert.

For inquiries, your name, e-mail, and phone number. Follow insert your twitter handle on Twitter to see a thread reporting the results from this study.

Reference of the full article.

Optional: On page 2, insert a figure, table, or infographic that summarizes the results. Please be sure the figure, table, or infographic does not appear in the paper as it may violate your copyright agreement with the publisher.



2a. Sending your Executive Summary

Send your Executive Summary in the body of the e-mail

Send to your “rolodex” of contacts (see Step 2b)

Subject of your e-mail should be short and concise

2a. Sending your Executive Summary *to elected officials*

- The sentence “The views expressed here are my own...” **is required** when sending to elected officials.
 - Do not include this sentence when reaching out to media; **it is only needed for outreach to elected officials**
- **Contact the Office of Government and Community Affairs [GCA]** (gca@jhu.edu or 443-287-9900) for the following:
 - E-mail addresses for health policy advisors in the offices of elected representatives
 - To notify them about your outreach to an elected official. Anything you send to an elected official could be considered lobbying activity, so GCA must be notified.
- Copy and paste your Executive Summary (and results visualization) in the body of the e-mail below your signature
- Template and example for the e-mail is provided

Complete the highlighted text specific to your findings

E-mail to elected official stakeholder with the Executive Summary

- Remember you must contact the JHU Office of Government and Community Affairs before reaching out to elected officials (gca@jhu.edu or 443-287-9900)

Subject: **insert a short, concise subject that declares your main finding**

Dear **insert names**,

Below (and attached) is an Executive Summary of a recent study that demonstrates **insert main message of the findings**.

These findings are an important contribution because complete.

This study is an example of **insert your school**-lead study that was funded by **insert funder** and impacts the lives of **insert stakeholder**.

The views expressed here are my own and do not necessarily reflect the policies or positions of **Johns Hopkins University/Johns Hopkins Health System**.

Sincerely,
Signature

insert the text of the Executive Summary and the visualization of findings in the e-mail body (below signature)

2b. Your “rolodex”

Your “rolodex” is an *e-mail listserv* of stakeholder contacts to whom you wish to send your Executive Summary, including

- Elected representatives (local, state, national)
- Funders
 - e.g. National Institutes of Health
- Policy and program decision makers
 - e.g. Guideline committee members
- Advocacy groups
 - e.g. American Cancer Society
 - e.g. professional societies
 - e.g. advocacy groups composed of people living with the disease of interest
- Writers for the media and “trade” publications – e.g. those specific to your disease or population of interest
 - e.g. Writers for IDNews for infectious diseases



2b. Growing your “rolodex”

When you read news coverage of science, who is writing it?

- Put them in your rolodex (but *first* reach out to your communications team *if* you need more help becoming “media ready”)

When you correspond with advocates, who are you corresponding with?

- Put them in your rolodex

When you are e-mailing with your funders, who are you e-mailing with?

- Put them in your rolodex

Who are the health policy people for your elected representatives?

- Put them in your rolodex

***Whenever you interact with a stakeholder,
consider putting them in your rolodex***



2c. Dissemination on Twitter

Why Twitter? So far, it is one of the more effective social media platforms for communicating science

Most of your stakeholders are likely on Twitter

- Elected representatives (local, state, national)
- Funders
- Policy and program decision makers
- Advocacy groups
- Writers for the media



Twitter for academic dialogue: The Basics

- # organizes content
 - You can add a “#” to any word/phrase
 - e.g. #ThisIsOurLane
 - e.g. #scicomm to reach an audience interested in scientific communication on Twitter
 - Adding a “#” specific to your findings will make your message go further
 - Most conferences now have “#”
- @ organizes people
 - e.g. @kerinalthoff

New to Twitter? Check out YouTube for videos on how to get started.



2c. Create a Twitter thread

- Start with a question to hook your reader
- Main message (don't bury the lead)
- Be sure you tag the journal
 - e.g. @TheLancetHIV
- Be sure you link to the full article
 - even if there is a paywall
- Be sure to acknowledge those who made your research possible (funders, participants, etc.)
 - e.g. @NIAIDNews
- Draft each tweet before you post
- Proof read!
 - Twitter does not let you edit your tweet once posted

Example: <https://twitter.com/kerinalthoff/status/1087888837228015618>

The screenshot shows a Twitter thread by Dr. Keri Althoff (@kerinalthoff) from January 22, 2019. The thread consists of three tweets. The first tweet asks a question about the proportion of cancers and heart attacks that could be avoided by eliminating smoking in adults with HIV. The second tweet provides a link to a study published in @TheLancetHIV and includes a bar chart titled 'Contributions of traditional and HIV-related risk fac...'. The third tweet continues the findings, mentioning that reducing elevated total cholesterol would avoid 44% of heart attacks, and eliminating hypertension would avoid 42%.

Dr. Keri Althoff @kerinalthoff

Do you know the proportion of [#cancers](#) that could be avoided by eliminating smoking in adults with [#HIV](#)? The proportion of [#heartattacks](#) that could be avoided? What do you think? 10%? Maybe even 15%? Answers below... (1/11)

7:44 PM - 22 Jan 2019

9 Retweets 23 Likes

Dr. Keri Althoff @kerinalthoff · Jan 22

In a study published in [@TheLancetHIV](#) (link to it here: bit.ly/2sHljKs), we estimated 24% of non-AIDS-defining cancers and 37% of heart attacks could be avoided if smoking was eliminated. That's a substantial amount of disease. Additional findings included...

Contributions of traditional and HIV-related risk fac...

The substantial proportion of non-AIDS-defining cancers, myocardial infarction, end-stage liver disease, and end-stage renal disease outcomes that could be prevented ...

thelancet.com

Dr. Keri Althoff @kerinalthoff · Jan 22

...Reducing elevated [#totalcholesterol](#) would avoid 44% of [#heartattacks](#), and eliminating [#hypertension](#) would avoid 42%. (3/11)

Reach stakeholders ≥ 2 ways

1. Executive Summary sent via e-mail

- Link to the first tweet in the Twitter thread is included in the Executive Summary

2. Twitter thread

Outcomes

After sending the example Executive Summary and posting the example Twitter thread, the following happened:

- **NEJM JWatch** reviewed the findings and created a blog post
- **The Body** wrote about the findings and tagged me on Twitter
- **Healio** wrote about the findings and tagged me on Twitter
- **POZ** (a magazine for people with HIV) wrote about the findings and tagged me on Twitter
- **Infectious Disease Advisory** wrote about the findings and tagged me on Twitter
- **IDNews** wrote about the findings and tagged me on Twitter

HIV clinicians and people with HIV were key stakeholders of my findings

Do It Yourself Dissemination: Summary of tool kit contents

1. Contents: JHU Media contacts

Link to JHU media contacts: <https://hub.jhu.edu/media/contact/>



2a. Contents: Executive summary

Executive Summary to e-mail to stakeholders

- Template
- Example

Additional e-mail text to accompany Executive Summary *when sending to elected officials*

- Template
- Example

E-mail to stakeholders - Executive Summary in the body of the e-mail – Example

Subject: Address traditional risk factors to prevent serious diseases in adults

EXECUTIVE SUMMARY: Traditional risk factors must be addressed to prevent

In a study published in *The Lancet HIV*, a multidisciplinary team of researchers showed that eliminating traditional lifestyle factors is essential to preserving the health of adults with HIV.

The study showed 24% of cancers and 37% of myocardial infarctions among adults with HIV could be avoided by eliminating **cigarette smoking** in this population. An additional 44% of myocardial infarctions could be avoided by reducing **total cholesterol** to (<240 mg/dL) and 42% could be avoided by reducing **hypertension**. Reducing hypertension would also avoid 39% of end-stage renal disease diagnoses. Eliminating **hepatitis C virus** infection would avoid 30% of end-stage liver disease diagnoses.

The study was conducted by following upwards of 60,000 adults with HIV in the [North American AIDS Cohort Collaboration on Research and Design](#) (NA-ACCORD). The roles of smoking, elevated total cholesterol, hypertension, diabetes, chronic kidney disease, hepatitis C and B infection, as well as markers of HIV disease progression (clinical AIDS diagnosis, CD4 count, and HIV viral load) were investigated on the following four diseases: cancer, myocardial infarctions, end-stage renal disease, and end-stage liver disease. Adults with HIV have a greater burden of these four diseases compared to adults without HIV. **These findings provide evidence that would result if a risk factor was eliminated.**

The authors conclude a substantial proportion of non-AIDS-defining cancers, diabetes, and end-stage renal disease could be prevented with interventions. Screening for these risk factors will require sustainable care models to improve the life of adults with HIV.

Lead investigator, Keri N Althoff, PhD, MPH, Associate Professor of Epidemiology of Public Health comments **“There is an urgency for resources and care models in order to protect the health of people as they live and age with HIV.”**

This study was funded through a K01 Career Development Award from the National Institutes of Health (NIH) and would not have been possible without the support of the Johns Hopkins Center for AIDS Research, the numerous NIH and state governments that support the [NA-ACCORD](#) and [JedFA](#).

For inquiries, contact Dr. Keri N Althoff at kalthoff@jhu.edu or 312-479-1174 to see a thread reporting the results from this study.

Althoff KN, et al. The contributions of traditional and HIV-related risk factors to cancer, end-stage liver and renal diseases in adults with HIV in the US studies. The Lancet HIV, 2019. Available at: <https://www.thelancet.com/journal/2019/09/fulltext>.

Example: E-mail to elected official stakeholder with the Executive Summary

Subject: Address traditional risk factors to prevent serious diseases in adults with HIV

Dear Sen. Cardin and Sen. Van Hollen,

Below is an Executive Summary of a study published this evening that demonstrates the need to address and prevent risk factors such as cigarette smoking, elevated total cholesterol, hypertension, and alcohol use among adults who are aging with HIV in order to avoid a substantial burden of cancer, heart attack, end-stage liver, and end-stage renal disease.

These findings are an important contribution to the evidence suggesting that the at HIV care cannot end with a suppressed viral load; but rather once HIV is controlled the work to address risk factors traditionally associated with these age-related outcomes begins.

This study is an example of Johns Hopkins Bloomberg School of Public Health-lead multidisciplinary science that is NIH-funded and impacts the lives of Marylanders with HIV. Thank you for your continued support of the NIH.

The views expressed here are my own and do not necessarily reflect the policies or positions of Johns Hopkins University.

Sincerely,
[Keri N Althoff](#), PhD, MPH

Associate Professor

Department of Epidemiology, Johns Hopkins Bloomberg School of Public Health
Joint Appointment in the Johns Hopkins Sidney Kimmel Cancer Center

[@keralthoff](#) on Twitter
Pronouns: She/Her/Hers

EXECUTIVE SUMMARY: Traditional risk factors must be addressed to prevent serious diseases in adults with HIV

In a study published in *The Lancet HIV*, a multidisciplinary team of researchers showed that eliminating traditional lifestyle factors is essential to preserving the health of adults with HIV.

The study showed 24% of cancers and 37% of myocardial infarctions among adults with HIV could be avoided by eliminating **cigarette smoking** in this population. An additional 44% of myocardial infarctions could be avoided by reducing **total cholesterol** to (<240 mg/dL) and 42% could be avoided by reducing **hypertension**. Reducing hypertension would also avoid 39% of end-stage renal disease diagnoses. Eliminating **hepatitis C virus** infection would avoid 30% of end-stage liver disease diagnoses.

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2b. Contents: Rolodex

Be sure you include

- Elected representatives (local, state, national)
- Funders
 - e.g. National Institutes of Health
- Policy and program decision makers
 - e.g. Guideline committee members
- Advocacy groups
 - e.g. American Cancer Society
 - e.g. professional societies
 - e.g. advocacy groups composed of people living with the disease of interest
- Writers for the media and “trade” publications – e.g. those specific to your disease or population of interest

2c. Twitter thread guidance

- Start with a question to hook your reader
- Main message (don't bury the lead)
- Be sure you tag the journal
- Be sure you link to the full article
- Be sure to acknowledge those who made your research possible (funders, participants, etc.)
- Draft each tweet before you post and proof read!



Example: <https://twitter.com/kerinalthoff/status/1087888837228015618>

Feedback welcome!
kalthoff@jhu.edu