How to make your voice heard to encourage public use of masks

Watch the AMA’s daily COVID-19 update, with insights from AMA leaders and experts about the pandemic.

Featured topic and speakers

AMA’s Chief Experience Officer Todd Unger speaks with three physicians on how they use social media to encourage others to #MaskUp and share the importance of wearing a face covering to prevent the spread of COVID-19.

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Speakers

- Meena Davuluri, MD, MPH, urologist and health outcomes fellow, Cornell NYP
- Pratistha Kiorala, MD, PhD, ob-gyn resident, Danbury Hospital
- Megan Srinivas, MD, MPH, infectious disease physician and research fellow, UNC

Transcript

Unger: Hello, this is the American Medical Association’s COVID-19 update. Today we’re talking about how physicians can make their voices heard on the important issue of wearing masks. I’m joined today by Dr. Meena Davuluri, a urologist and health outcomes fellow at Cornell New York Presbyterian Medical Center in New York; Dr. Pratistha Koirala, an obstetrics and gynecology resident at Danbury Hospital, and delegate for the AMA Residents and Fellows Section, or RFS, in Danbury, Connecticut; and Dr. Megan Srinivas, an infectious disease physician and translational health policy research fellow...
at UNC, a delegate for the AMA RFS and the AMA RFS member on the AMA Council on Medical Service in Fort Dodge, Iowa. I'm Todd Unger, AMA's Chief Experience Officer in Chicago. All three of you have been extremely vocal in encouraging the use of masks by the public. Let's start by asking why is this issue so important to you? And Dr. Davuluri, if you would start.

Dr. Davuluri: Yeah, thank you so much, Todd. And thanks for the introduction. I think a lot of the passion for having the mask really started from seeing what I saw here in New York City. I'm a urologist that got transpositioned into working under the front line once COVID was peaking here. And just seeing the devastating effects that COVID had upfront, seeing the amount that the hospitals had to spread, seeing what we had to experience, prevention is so much better than trying to catch up down the road and treat those issues down the road. And for those reasons, after seeing everything so up close, and that now we see New York things are starting to settle down, while that's not the case in the rest of the country, it really, really highlights the importance of why preventing a second wave from happening again, is so important. That's why the masks are such an important part of preventing that.

Unger: Dr. Koirala.

Dr. Koirala: So in my day to day life, I practice medicine as an obstetrics and gynecology resident. But one of the other hats that I wear is actually as an MD PhD, meaning that I am a scientist. And I have dedicated so much of my life and my time to looking for things that we can do to save lives and to cure diseases. And the craziest thing about everything that's happening right now is that masks are probably more effective at preventing the spread of COVID-19 and saving lives than just about anything that's happening in any lab now. I think the only other thing that is quite as important as masks, basic hygiene, washing hands, is discovering a vaccine. So for the day to day public, this is the way that you show that you care about your own health, that you care about the health of your communities, and that you care about the people in your life who love and who you love, like your parents who are older, and all the people that you work with.

Unger: Dr. Srinivas.

Dr. Srinivas: And just to build off of what both Meena and Pratistha are saying, when it comes to being able to take actions that are so small they barely inconvenience to you, but can have such a direct as public health outcome, masks are at the top of that list. I'm an infectious disease physician, but I also have a degree in public health. And so COVID-19 is really these two worlds combined. It's about how can we not only treat those that are falling sick, but how do we prevent it from becoming the further and further outbreak or pandemic. And that's where masks come into play. From what we can see through the model, it's even more effective if we could get 80% of our population to wear masks than it would be to do another lockdown. So it's really about getting on top of it as much as possible, to cause as little disruption as possible, and enable us to adapt to a new way safer way of living and having still a life at the same time. Masks are really the solution and prevention is all we
have.

**Unger:** Dr. Koirala, why is it so important right now that physician voices, especially, need to be heard on this and other public health issues?

**Dr. Koirala:** So I think that physicians are in a group of people who have dedicated our lives to taking care of others. We are the ones where if you or one of your loved ones get sick with COVID, you end up in our hospitals and we take care of you, whether or not you wear a mask. And my goal is that I have fewer people coming into our hospital who are sick. Most of my patients are pregnant, so I very much don't want to see more patients who are pregnant with COVID-19. And we have this unique experience of being physicians caring for COVID patients, but we also are, each and every single one of us, active members of our communities on a larger scale. So both as a physician, a scientist, but also a human being who has a life that I want to live, bringing all those perspectives into play and understanding that there is a balance, and like Dr. Srinivas mentioned earlier, masks allow us to continue living the lives that we want to live in the fullest and safest way.

**Unger:** How about you, Dr. Davuluri?

**Dr. Davuluri:** Absolutely. And I think one of the worst parts about wearing masks right now is that it has become so politicized. And I think that's why it's so critical for physicians to step up and give this voice of, "Hey, we're really looking out for what's best for you." As Pratistha mentioned, all we were trying to do is do the best that we can for our patients. And all we want is for patients to be really safe. Personally, as a surgeon, as someone who spends 12 to 14 hours of my day in a mask, of course wearing a mask off of the bat is not something that anyone's used to and it's different, it's a different piece of clothing that we've never really tried before, but also speaking from a perspective of someone who's been doing it for five plus years of my life, every single day, I feel like that I can really lend to maybe the level of discomfort that certain people might feel from wearing a mask and give tips on how can you wear a mask? How can you wear a mask safely? And this is how I wear my mask every day. I think just hearing that message is so, so critical. And hearing it from people who have been doing it for a long time is particularly important.

**Unger:** Dr. Srinivas, I happen to follow you on social media and I was pretty disturbed about the story you told about what happened because you're so vocal on social platforms about mask wearing. Can you talk about that?

**Dr. Srinivas:** Sure. So unfortunately, as such the Dr. Davuluri alluded to, it's become a very heightened conversation discussing masks and public health interventions that we should take. And honestly, even just recognizing that COVID-19 is an issue that we need to address from both medical and public health world. In that setting, as I'm sure several people in the public health world, unfortunately, have had to experience, you've gotten trolls, you get messaging, you get people who are not exactly happy with you being vocal and vociferous about wanting to do everything you can to
advocate for the right mitigation strategies.

Unfortunately, about a week ago, actually, when I was on a video conference call with these fine doctors here discussing how we could amp up a mask up strategy ourselves, my parents ended up getting a very disturbing phone call where the person who called pretended were calling from my phone. So it looked like they were calling from my phone on my desk. And then they made a very threatening innuendo that they had already hurt me and that they were on their way to my parents' house.

It's unfortunate that as public health officials we have these threats out there. But it definitely was shocking to hear that they'd actually got to the extent of finding my parents' personal information and including my family who, lives 70 miles away from me, in the whole situation. And in all honesty, talking to my parents, the first thing that they said is, "As long as you're safe, the most important thing for you to know is you need to continue to send out your message and not stop." There are idiots out there who wants to get in the way, but it's more important that we try to save as many lives as possible.

**Unger:** Well, that's a very courageous and very courageous words from your parents as well. I have a question for the three of you, since you are vocal on social media, not all physicians are. In a world where we do need to hear more of physician voices, what do you say to your colleagues about being more vocal. Dr. Srinivas, where would you start?

**Dr. Srinivas:** We have a very privileged position being physicians. Just having that title of doctor, you automatically have this aura of trust that's built into your name. And using that in a way that can help with the public health efforts, that can help protect your community is so vital. So if I can use that title, that trust that I have from my patients and from those around me, my neighbors, to be able to tell them a story, tell them stories of my friends on the front lines, tell them stories of people who unfortunately has passed away, or tell them stories of how they can save somebody else's life in the community, then I can't overlook that responsibility. It's part of every single one of our oaths of office to always do whatever we can to bring help to those around us. And being a storyteller and an advocate, especially in the setting of a pandemic, a pandemic where the policy is written by people without a health care background, that is the most important thing we can do in our profession today.

**Dr. Davuluri:** I think those are some excellent points that Megan made and just really highlight the importance of it. And I think building off of that, one of the things that I've recognized by being so active on social media is one, I became active on social media because another physician and my mentors encouraged me to become active on social media, by showing me the benefits of being involved in... on whether it's Twitter or whatever it may be as a source of just getting good information. And through that, I was able to really be active during the whole COVID-19 crisis because getting information quickly when your patients are intubated in the hospital and sick and trying to understand the best medicine for a disease process we don't fully understand, that swift transfer of information
was absolutely critical and impacted how we treated our patients.

And sharing that story like Megan has already mentioned and sharing how I found being on social media was so helpful, not just from a public health perspective to raise awareness about it, but for also this rapid information sharing was really a catalyst where other physicians then said, "Oh, hey, maybe I should join Twitter." And other physicians have subsequently joined. And then just seeing that community come together in a social media platform really takes it from a linear growth curve to an exponential growth curve. I think that's what the three of us have tried to do. And that's what all the physicians have tried to do, we've tried to put these messages out, is really create this community, cater towards both physicians and the public health and just get information out there the best way that we know how

**Unger:** Dr. Koirala?

**Dr. Koirala:** For those of you who’ve been following the medical universe on social media right now, there’s actually a paper published, and now retracted, in the Journal of Vascular Surgery, talking about professionalism in medicine. And one of the things that they very specifically called out as being unprofessional behavior was utilizing tools like social media to have political opinions or to have commentary on public health issues. And that paper was very quickly retracted because I think that our generation of physicians, especially, has rejected the notion that we should not speak up on issues that matter. Like Dr. Srinivas said, we are in a very unique position of being incredibly qualified with the medical opinions that we have. Because they’re not usually opinions, they’re usually based in fact.

We are considered some of the most trusted professionals in the United States and in the world as a whole, which means that when we speak, people tend to listen and they listen for a reason; it’s because we’re educated. And when we speak, we’re doing our best to speak truth. And I also think that one of the other drivers for why we all have a responsibility to be vocal on issues of importance, especially when it’s life and death, in the case of COVID-19, it’s literally in our medical ethics. If you look at our code of medical ethics, that’s put out by the AMA, one of the pillars is that we should recognize the social injustices that are happening for our patients and our profession. And when we see things that are unjust, that it is our responsibility and it is our duty and it is our code that we step up and we advocate for change.

**Unger:** Well, speaking of advocating for change, talk a little bit about AMA’s new campaign, which all three of you are part of and advising us on, it’s called Mask Up, do encourage folks to wear masks. Tell me a little bit, how do campaigns like this help physicians get the word out? Dr. Davuluri?

**Dr. Davuluri:** Thanks Todd for that question, or that intro to the question and the background. So as you said, the three of us have been working with it and it really just started with a conversation amongst the three of us saying, "Hey, we, as young doctors really feel like when we’re speaking to our
other colleagues, that we are finding it difficult to unify our voice above all the other noise that's happening." Right now, there's a lot of information from a lot of different areas and it's hard for physicians to find a unified platform to say, "Hey, we support masking up and we support wearing masks and these general prevention measures as physicians to help protect the public."

And so that's really where our conversation started and having those types of conversations amongst individuals is really important and allows us to have this wider conversation and allows medical organizations such as the American Medical Association, which does represent so many physicians and specialties, to unify. And there's so many friends of mine from medical school that I've spoken to, that say, "I just wish there was something more that I could support, something that was really simple." And this really allows for that very, very needed platform. And we're very much looking forward to it.

**Dr. Srinivas:** Yeah. Just to speak to what Dr. Davuluri was saying, it was really about trying to use the tools already at our disposal. And like Dr. Koirala was discussing, our generation lives on social media, to a certain extent. It's been around us from the moment we entered college through our medical career. And so utilizing those tools that are already available to amplify our voices is something that we really need to capture. And as an organization, being able to utilize that momentum to create a public health campaign like Masking Up, something simple, tweeting a picture of yourself and the hashtag #MaskUp, it can create an entire movement of change in this generation. And that's what we're looking for.

Especially as we're finding that, unfortunately, the younger and younger generations that are getting afflicted with COVID-19 because they're not taking the right precautions. Those are the people we can really capture with this type of vehicle for change. And on top of that, it brings a voice to so many doctors that felt powerless because they might be in the middle of nowhere Wisconsin, feeling like we don't have an organization that they owned themselves, that they can stand behind or somebody in a huge city like Chicago that feels like they're a solo voice in their practice, having an entity like the American Medical Association say, "Hey, we're with you. We want to work with you. You are going to be the face of this giant campaign." Is power and enables them to really speak true to their community.

**Unger:** Well, last question, Dr Koirala, there’s been a lot of confusion on when to wear masks as well as conflicting guidance from governors and others. What kind of information do you want to clarify right now?

**Dr. Koirala:** I think that one of the things that has been very, very difficult for the population in general to understand is how quickly our perception on the need and utility of masks has changed. I remember back in February and March being resistant myself. There was data from other viral respiratory illnesses that showed that in those cases that masks might have actually served as a fomite, so something that spread the illness rather than prevented the illness, just because people were touching their faces and not doing things like washing their hands. And as we’ve learned more and more about COVID.... So, first of all, I think that we have realized that there isn't as much contact transfer as we
thought there would be. And that even if people are spreading it by touching a mask and touching something else, that that is really nominal.

And really the asymptomatic carriers, people who didn't even realize they were sick, but were transferring the disease and wouldn't have necessarily stayed at home because they didn't realize, by putting a mask on we ensure that people aren't unintentionally going out and spreading this disease. And that's something that I think is unique to COVID compared to some of the other illnesses that we've seen recently, in that there is a large amount of asymptomatic spread. So we just learned more about this disease. And as we learn, the recommendations and the guidelines that we give change too. That is a normal part of the scientific process. That's a normal part of how we, as physicians, give advice. We are always looking at data and we should always be changing our recommendations to do what is most accurate.

That is a lot of whiplash, though, for the general public, right? At the beginning of all of this, even the CDC was telling us not to wear masks in public. I still remember Dr. Jerome Adams, our Surgeon General, telling people, "Don't wear masks because we are trying to reserve them for health care workers who are on the frontline." But also because we didn't fully understand the disease as a whole. And now as we have more PPE available and people are able to do things like make their homemade masks that are pretty effective to prevent asymptomatic spread, we should all be changing our views as well and wearing masks in public.

**Dr. Davuluri:** I think those are really great points. And I think particularly the point made that our recommendations are likely going to change as we move forward is really critical. But I think right now there's two points that are really clear and it gets a little jumbled. I think one, wear a mask if you're inside where there's multiple people around you, you have to wear a mask. And two, if you're outside and you're more than six to eight feet away from people, then maybe you don't need to wear a mask. But if you're ever in a scenario where people are within six feet of you, whether that's inside or outside, a mask is critical. And that's really the takeaway with masks. [inaudible 00:19:53] It can be a fun way to wear tie-dye on your face and express yourself.

**Dr. Srinivas:** On top of that, we also need to keep in mind that none of this is, once again, definitive. If you are yelling, if you are playing sports, the range in which your spit or your droplets reaches is further. So if you have any type of contact with other people, even if it's passing by, come and go kind of thing, definitely wear a mask. And for me, it's my Harry Potter mask.

**Dr. Davuluri:** Are you a Gryffindor?

**Dr. Srinivas:** Of course.

**Unger:** Well, thank you very much. Bottom line #MaskUp. I'm going to thank Doctors Srinivas, Koirala, and Davuluri for being with us here today and sharing their perspectives, but also for being vocal on
social media platforms and helping to keep the focus on science and safety. That's it for today's COVID-19 update. We'll be back tomorrow with another segment. For more information on the AMA’s #MaskUp campaign visit ama-assn.org/maskup. For updated resources on COVID-19 go to ama-assn.org/COVID-19. Thanks for joining us today and please stay safe.

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