

EPISODE 192

[INTRODUCTION]

[00:00:09] ANNOUNCER: Welcome to this week's episode of Coffee with a Journalist brought to you by OnePitch. Are you looking for an easier way to pitch the right journalists? Head to our website at onepitch.co to start your free 14-day trial.

Our guest on today's episode of Coffee with a Journalist is Aria Bendix from NBC News. As the breaking health reporter, Aria covers a variety of health-related topics with an emphasis on mental health, medical conditions, and public health issues. During the episode, Aria talks about a pitch that provided an entry point to a story she wanted to write. She dissects subject lines and pitches that lack detail, how to format your pitches to her preferences, and more. Let's dive in.

[INTERVIEW]

[00:01:04] BB: Welcome, everyone. This is Coffee with a Journalist. I'm Beck Bamberger. We are here because we talk to media, and learn all the things they like and don't like about publicists, so a very helpful show. We're approaching, by the way, excitingly, almost 200 episodes of this. So we have lots of now media friends who know all these great publicists at OnePitch, very exciting.

Anyway, we're here today with Aria Bendix, who is the health reporter, even sometimes breaking health reporter, at NBC News. Aria, thanks for being here.

[00:01:36] AB: Thanks for having me. Congrats on the milestone.

[00:01:39] BB: Yes. Oh, my God. We've been doing this a while, so yes, yes. As I just mentioned before we started rolling here, it's so fun when a journalist comes on here and is like, "Oh, yes. My other friends, they did the podcast, too." So it's a little community we got going on here, which is super fun.

[00:01:55] AB: Yes. I get good tips myself.

[00:01:57] BB: Yes. Oh, even better. Okay. Well, first then, first. Now, I need to do this more consistently, so note to my own self. But for those who are maybe not as familiar, how would you describe specifically the health beat for NBC News.

[00:02:12] AB: Yes. So I'm the health reporter for NBC News Digital. So that's the reporting arm for our national website. So it's really just me, and I get to carve out a little bit of my own.

[00:02:21] BB: It's just you. Okay. You're the person.

[00:02:23] AB: I'm the person. I tend to focus more on public health, so disease, nutrition, vaccines, drugs, medical discoveries, all the things. What I don't write about is lifestyle and wellness, and that's a common misconception based on the pitches in my inbox. But I tend to veer away from those subjects.

[00:02:43] BB: Got you. Speaking of inbox, our favorite thing here, how is yours?

[00:02:47] AB: It's manageable. There are hundreds of emails, like everyone else, I assume, who comes on the podcast. But I have a nice system, I think, for moving through it quickly.

[00:02:57] BB: Well, do tell. Do tell. What is the system?

[00:03:00] AB: Well, I think it's just really a one-sentence shot for people. If it doesn't really pass muster after the first sentence, I'm not going to dive deeper into the email. That just allows me to move through things really quickly.

[00:03:14] BB: Oh. So let me ask you. Do you see like the one-sentence email or the one-sentence previewed on like your emails and judge by that? Or do you judge it all by subject line?

[00:03:24] AB: Some gets filtered out with the subject line alone. Then if anything seems credible, I'll go into the actual body of the email and then see what the sentence looks like.

[00:03:33] BB: Oh, okay. So do you have any examples of some that you recently have liked?

[00:03:41] AB: Yes, subject line-wise. I tend to be pretty straightforward in my preferences, just because health – you don't want to get too creative with what you're pitching. So one of the ones I liked the other day was I had gotten a pitch that said, “Public health MD shares update on urgent medical needs of hostages.” This was, obviously, related to Israel-Hamas conflict. I was looking for an entry point on my beat to that story since everyone is writing about it. I thought that was just the perfect subject line because it had public health in the title. So we, obviously, knew that they were written to the right person.

[00:04:16] BB: Yes, on the money.

[00:04:17] AB: Yes. MD that tells me who the source is and then two words in there that stuck out, update and urgent. Often, those words are used hyperbolically in the subject lines. But in this case, they were not because, obviously, this is an urgent story, and the person I interviewed had new information actually to share. So I did end up writing a couple posts for our live blog on that story, and it was all because the subject line grabbed me initially.

[00:04:44] BB: That's great. Was it from a publicist team?

[00:04:47] AB: It was from a nonprofit. So I think they want to get the message out. But in this case, I think, yes, that was the best way to connect to what was happening on the ground there.

[00:04:57] BB: Wow. I like it. Okay. Do you have another one perhaps?

[00:05:01] AB: I do. I mean, the rest of mine that I really enjoy, they're all expert-related. I think it comes as no surprise that on the health beat you're always looking for sources. So anytime I can see that in the subject line is great. One I just got this morning was abortion rights on ballot in Virginia, Ohio. Feminist and gender expert available for comment. So it is directly telling me the news and then what they're offering. So that's a win-win in my book.

[00:05:30] BB: Ooh, I think that's a good point there for just subject lines is encapsulating what is in reference to and then the expert. I think so many people just send subject lines like, "MD on abortion rights," and you're like, "Okay." You being in like more breaking news and national stuff would be like, "Yes, I see how this ties. But isn't it so nice when it's a very clear tie?"

[00:05:53] AB: Absolutely, yes. You need to know what they're willing to comment on.

[00:05:56] BB: Yes, yes, yes, yes.

[00:05:58] AB: Sometimes, I'm getting the news from that subject line itself, which is even better. Maybe it's story I missed, and I think, "Oh, shoot. Should I be paying attention to that because I was working on something else that day?" So it's really nice, too, when I'm actually informed of a story that may have escaped my radar.

[00:06:17] BB: Oh, look at that. Okay. So then what do you do with the emails, the pitches that are just not a fit?

[00:06:23] AB: I try to respond to ones that are credible or even ones that I have a pre-existing relationship with. Unfortunately, I am a ghoster sometimes in the sense that no response is the response, just because of the volume. I do get a lot of consumer products or just pitches revolved around a specific company, which I'm sure a lot of journalists do. But on my beat in particular with health, you just want to be really careful to avoid those. That's so much of my inbox that I just have to pass right away.

[00:06:56] BB: Yes. Why do you think that happens, by the way? Why are you getting those bad pitches?

[00:07:01] AB: You know, I understand there are very small companies out there looking to make a name for themselves and probably a lot of interesting products. But you want to go to someone who actually does reviews. Maybe from the reader perspective, there's not such a clear delineation always of what is a consumer review versus a standard piece of journalism. We could do a better job of that, too, making that clear and especially in our own bios.

[00:07:27] BB: Yes, perhaps. So that's a very generous answer, by the way, Aria. You're not saying, "No one's reading my articles. They just bad-pitch me. Okay." So sometimes, you ghost because you have to, but otherwise. Oh, do you keep just kind of your own Google file of your email, so when you need to search and find someone, you just do your own searching through your inbox?

[00:07:50] AB: I will do that, but I think you may know this from interviewing previous NBC Universal reporters that we are that news organization that deletes our emails after 60 days. So we are not able to search our inboxes as extensively as some other news organizations. So I do have a Google spreadsheet with sources that I am interested in or ones that I've spoken with in the past. So I can at least hang on to things that seem promising.

[00:08:18] BB: Oh, okay. So you got your own sheet. How do you get on the sheet?

[00:08:21] AB: It's just things that are on my beat. I sort of separate it by subject matter. Usually, I'm looking often for some sort of credentials when I'm talking about an expert source, so working for a university affiliated with a hospital. That type of thing often comes up.

[00:08:37] BB: Got you. Is there any complaint you have about publicists?

[00:08:44] AB: I think we're all doing our job, and it should be a symbiotic relationship.

[00:08:49] BB: Yes. It should in theory.

[00:08:52] AB: I think doing your research, obviously, is really important specificity in the language of what you're pitching. The other day, I got a pitch for an expert who has some great insight on emerging trends in health tech, which tells me nothing what the expert, what insight, what's the trend. So I think my gripe is just not giving me enough information to make an informed decision. I don't know if it will waste my time or not, right, if I don't know what you're suggesting that I write about. Then, I guess, overhyping of pitches is one thing that comes up a lot.

[00:09:29] BB: Oh, such as?

[00:09:31] AB: So when something is – they're saying it's innovative or groundbreaking or paradigm shifting.

[00:09:35] BB: Oh, innovative.

[00:09:38] AB: It usually is not. Like a good idea will sell itself. It will speak for itself. So you got to get rid of the buzzwords. Maybe some people look for it, and that piques their interests. In my case, we just want to be wary of anything that comes off of it hyperbolic.

[00:09:56] BB: Yes. That is a policy of PR people, unfortunately. I don't know what that disease is about, but yes.

[BREAK]

[00:10:06] ANNOUNCER: Today's interview will continue after this brief message brought to you by OnePitch. Are you curious to learn about the unique ways OnePitch helps brands engage with the right journalists? Head to onepitch.co and create your own custom media list in five minutes or less. Now, back to today's episode.

[INTERVIEW RESUMED]

[00:10:29] BB: Okay. What about exclusives or embargos?

[00:10:33] AB: Love both.

[00:10:35] BB: Great.

[00:10:35] AB: I mean, as a journalist, obviously, I want to be first to everything. So I'm not ashamed to admit that I do perk up when I see the word exclusive in a subject line. If it's a false advertisement, though, it kind of has the opposite of effect of putting me off. So if people are pitching something like exclusive, everyone is trying a new trend on TikTok, that's not an exclusive story. You get a little upset when you see that.

Embargos are my bread and butter as a health reporter, so most of the big studies are sent to me under embargo. That organizes the bulk of my coverage. It's a word that heavily populates my inbox, so always happy to see that. Because as a health reporter, it tips me off that this is something. If they're putting it behind embargo, they've been planning for it, and it's probably a decent credible study.

[00:11:24] BB: Okay. Is there anything you're working on right now that you think about how you're going to source? In other words, you're like, "Hmm, okay. I got a story that I need on this." What's your protocol? I don't usually ask this anymore. In earlier episodes, we would. But just like how do you go about crafting the sources for a story?

[00:11:44] AB: That's a really good question. I think it depends on the type of story, obviously, if it's a more patient-focused story, which I'm doing a feature right now on young individuals sort of in their 20s and 30s who have been diagnosed with colon cancer. So finding those patients is difficult because it can sort of feel like you're sending messages out to the void.

So I do sift through my inbox to see if anyone has pitched something related to colon cancer reach out to nonprofits, to medical orgs, hospitals, even old doctor contacts that I know they treat this disease. Do they have any patients in their roster that they're willing to connect me with? But I'm always open to finding more ways to do that because the patient ones are the most difficult ones often to source.

[00:12:34] BB: Okay, everybody. Hear that. Patients, patients having those lined up. Okay. Then I already asked about just kind of the articles and kind of sussing out that. Relationship building then. So someone's never worked with you before. Maybe they have some patients. They're listening to the show. They have that MD that specializes in such and such cancer. What's the best way for someone to make a connection with you but also keep it going? I think that's the other piece. One and done of like, "Hey, we did a story once together." Fine, but keep it ongoing. How would you suggest?

[00:13:08] AB: Yes. I mean, I am a big fan of email first. Then once we have established that relationship, I do like text message and I will accept the occasional call.

[00:13:17] BB: Oh, really?

[00:13:19] AB: Yes, yes. I have to be on my work phone a lot. So I find that's just a quicker way to message. It feels a little less formal that we can easily trade pitches or yeses or nos back and forth via text. I don't think a cold text is the best approach.

[00:13:34] BB: No, no. I was going to say.

[00:13:34] AB: But I know you are, then, yes, I'm happy to respond that way.

[00:13:39] BB: Oh, okay. One of the first people I've ever heard for texting. Okay. Got it. So email first. Maybe eventually you upgrade to text. Do you ever see people in person?

[00:13:51] AB: I used to in the earlier days of my career, when I think I was still building sources. At this point, I feel like I'm a little more sparing.

[00:13:58] BB: Yes, yes. You got it.

[00:14:00] AB: Coffee dates and such. But, again, I think if it's someone that I have worked with in the past, and I feel like we are aligned in terms of what they're trying to pitch and what I cover, that can be a productive coffee date, right? To talk a little bit more about what's on my radar. Even if we do it virtually, too, that I'm happy to do that, especially since not everyone is based in New York.

[00:14:21] BB: So maybe an eventual upgrade to a coffee date. Okay, everybody. Noted, noted. First email, then text, maybe coffee. Okay. How about a rapid-fire session here, Aria? I have some quick questions, and you can give us your blazing answers.

[00:14:37] AB: Okay. Let's do it.

[00:14:38] BB: Let's do it. Okay. Video or phone interview?

[00:14:42] AB: Phone interview. I use a transcription service. I really like to highlight quotes as we're talking. It's really hard to do that with video, so I do love the phone.

[00:14:51] BB: Bullet points or paragraphs in a pitch?

[00:14:54] AB: In a pitch bullet points. But everywhere else paragraphs.

[00:14:57] BB: Okay. Short or long pitches?

[00:15:00] AB: I like short but not too short. So I want the topline summary and then two or three key details, just so it's not too vague.

[00:15:07] BB: Images attached or a Dropbox zip file?

[00:15:11] AB: I actually don't have a preference, I think, with this one. Either is fine. If they're good images, they're good images. I'll find a way to open them.

[00:15:17] BB: Okay, okay. We alluded, too, a little bit with the email, but email or how about a Twitter or XDM? Are you on X?

[00:15:25] AB: I am. I'm not as active as I used to be, so I don't think that's the best way to reach out to me. I think I am an email person through and through.

[00:15:34] BB: Yes. Okay. Sidebar, what do you think is going to happen with X? Is it my space?

[00:15:41] AB: It feels like a very fraught time. I might defer that to my tech reporter colleagues. In terms of the journalistic landscape, I think we're trying to find other ways to connect with sources and to get our news. It's just not there anymore in my mind.

[00:15:57] BB: I will plead the fifth. I'm saying more. But, okay, let's continue. One follow-up or multiple?

[00:16:02] AB: I think one follow-up is a nice reminder, and then any more becomes a nuisance. Yes.

[00:16:07] BB: Direct or creative subject lines?

[00:16:11] AB: I'm direct, yes, especially with my beat. When you get too cute with it, it's hard for me to understand what you're pitching.

[00:16:17] BB: And watch that hyperbole, as we discussed. Press releases or media kit?

[00:16:22] AB: I think media kit, but I'm not really picky either way.

[00:16:26] BB: And then is there a time you read pitches?

[00:16:29] AB: I read most of the pitches in the morning with my coffee, as I'm sort of sifting through the inbox, and I am deciding at that point what I'm going to write about for the day. Usually, I like to wrap up my stories in the evening and then start fresh in the morning, but –

[00:16:42] BB: Ah, okay. One a day and then start a new day.

[00:16:44] AB: Yes. I do monitor the inbox throughout the day, though, which I'm trying to get better about not clicking on every email that comes up.

[00:16:51] BB: Yes. Oh, aren't we all? Then we also talked about sources. But if you want to elaborate the types of sources you really are gobsmacked for.

[00:17:03] AB: Yes. That's a good question. I mean, sort of broad strokes. I'm looking for doctors, nurses, scientists, public health officials. Then from the patient perspective, I really would like to see stories that I've never seen or heard of before. I can give an example from the other day. This was a PR person who I had established a relationship with with another story, and she did call me the other day, late on a Friday, and pitched this couple who had been married for 63 years. They essentially had heart attacks right around the same time.

[00:17:36] BB: What's right around the same time? Like the same day?

[00:17:39] AB: That's what they think. I mean, it's hard to tell the exact moment sometimes because they weren't – it wasn't one of those ones that required immediate surgery. But they went into the hospital together, and they had back-to-back surgeries in the same hospital, were recovering in next door rooms. Essentially, if you've seen *The Notebook*, it was kind of like *The Notebook* –

[00:17:56] BB: Oh, my gosh.

[00:17:58] AB: Were just going through this health scare together. Luckily, they're fine. But it was one of those stories that I didn't know was medically possible, and it was just so heartwarming that they had recovered and were doing it together. He was sneaking into her room to take care of her. I thought I just have to write this, even though it's late on a Friday.

[00:18:16] BB: Yes. It's very touching.

[00:18:19] AB: Yes. So something I've never heard of before is always a good sign.

[00:18:23] BB: Oh, okay. Send her something she's never heard of. Okay. Aria, is there anything you want to promote, talk about, emphasize, whatnot? What you got?

[00:18:36] AB: I'll plug a recent feature I wrote alongside my colleague, Alicia Lozano, about the mental health crisis in Maui.

[00:18:45] BB: Yes. I'm looking at it right now. Yes, two days ago.

[00:18:48] AB: Yes. It took us months to report this one. Alicia took several trips there. It was pretty heartbreaking to write about but I think an important story. So if people want to take a read, we'd appreciate it. It was – we **[inaudible 00:19:02]**.

[00:19:04] BB: Yes. I'm looking at it right now. How many trips did she do, by the way?

[00:19:08] AB: I think she's done a couple thus far. She might even have a few more planned. We're really hoping to continue to monitor the situation and do follow-ups. So mental health is something we didn't talk about, but that's also something that I am constantly writing about, and it's an important part of health and healthcare. So that story was the big story, in my mind.

[00:19:31] BB: Oh, it's quite extensive, by the way. Yes. Aria, thank you for being here today.

[00:19:36] AB: Thanks for having me. It was so fun.

[00:19:37] BB: It was. If you have doctors, nurses, patients, you got to email Aria.

[00:19:45] AB: Send them my way.

[00:19:45] BB: That's my take. Send it her way. Perfect. Well, thank you, Aria, so much. Great having you. Aria Bendix, our health reporter at NBC News, everybody. Thanks so much.

[END OF INTERVIEW]

[00:19:56] ANNOUNCER: Thanks for listening to this week's Coffee with a Journalist episode, featuring Aria Bendix from NBC News. For more exclusive insights about the journalists on this podcast, subscribe to our weekly podcast newsletter at onepitch.co/podcast. We'll see you next week with even more insights about the journalists you want to learn more about. Until then, start great stories.

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