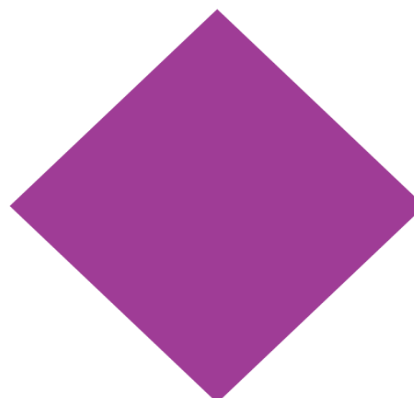


Cochrane's Spokesperson Policy

Revised Version: August 2020



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1 Context and rationale

Cochrane's mission is to promote evidence-informed health decision-making by producing high-quality, relevant, accessible systematic reviews and other synthesized research evidence. Our work is guided by [Principles of Collaboration](#) to ensure our 12,000 members and 70,000 supporters¹ around the world work collaboratively in a collegial environment and minimize the risk of damaging conflict.

Cochrane's global community is made up of people with strong and, at times, conflicting views on health and healthcare evidence issues; on our own published evidence and content; and on the organization's policies and direction. This is a good thing, and Cochrane's evidence and organizational plans and activities will change and adapt in response to active debate, open discussion and reasoned criticism. Cochrane is proud of the intellectual rigour in which its members and supporters challenge one another and those outside the organization, through respectful dialogue, dynamic interaction and mutual collaboration in order to produce and publish the highest quality health evidence.

Most Cochrane members and supporters have multiple affiliations: to their employers, funders or other organizations. Every Cochrane member or supporter is, to some degree, a representative of the organization and is encouraged to talk and write about Cochrane and its work. The intention of this Spokesperson Policy is to help them do that, as communicating and promoting the use of Cochrane evidence is vital to our organizational mission and [strategy](#).

However, Cochrane is also an international organization with a mission, duties and responsibilities it must fulfil. The Cochrane Collaboration is legally constituted as a limited liability company and [a charity registered in the United Kingdom](#). This means that we are governed by UK laws; and official statements, advocacy positions and activities conducted in Cochrane's name must be based on advancing our [mission](#) and comply with guidance given by the UK government on a charity's campaigning and political activity. The Governing Board (made up of the organization's charitable Trustees and company Directors) is responsible for approving and establishing Cochrane's official policies and positions; as well as ensuring that the charity's outputs and activities meet its legal objects, mission and public benefit objectives².

Cochrane's name and logo, its published evidence, and its official policies, statements and positions on issues constitute Cochrane's organizational 'voice' and identity for which we are accountable. As our global reach and profile increases, a failure to differentiate between official organizational messages and positions, and a Cochrane member or supporter's individual views, may cause misunderstanding and potentially damage Cochrane's reputation and credibility. In extreme cases, this could lead to legal action against the organization and loss of the funding that sustains our work.

This Spokesperson Policy therefore establishes guidelines and supporting guidance that applies to all Cochrane members and supporters. Given the complexity, scale, scope and culture of our work, this is challenging; but members and supporters – and particularly those who hold leadership positions – can protect against misunderstandings by clearly distinguishing whether they are speaking or writing on Cochrane's behalf or in a personal capacity. This is particularly relevant if there is reason to believe that what is being said or written could be misinterpreted as an official Cochrane policy, opinion or view.

¹As of January 2020

²See Cochrane's annual *Trustees' Report and Financial Statements* for more details:

https://www.cochrane.org/sites/default/files/public/uploads/cochrane_collaboration_2018_trustees_report_and_financial_statements.pdf

2 Who are official spokespeople for Cochrane?

Cochrane has developed clear guidance on who speaks or writes officially in Cochrane's name, by virtue of their role and responsibilities within the organization, regardless of where that person is based geographically and who their formal employer is.

2.1 Global

'Official' spokespeople representing Cochrane are the Co-Chairs and Trustees of the Cochrane Governing Board, the Chief Executive Officer, Editor-in-Chief of the Cochrane Library and other members of Cochrane's Senior Management Team. Depending on the issue, other individuals who have specialist expertise within Cochrane may be asked by the organization's leadership to speak or write on behalf of Cochrane. For people in these Cochrane global leadership positions, and those asked to represent Cochrane as an official spokesperson at a time or event, whatever they say could be construed as official policy. Therefore, they must be diligent in clarifying if they are representing Cochrane's official policies and positions, or expressing individual views, and seek guidance if they are unsure.

2.2 Country or Regional level

In a specific country or region, Cochrane is officially represented by the Director(s) of the Cochrane Geographic Group or Geographic Network who is the designated leader or co-ordinator of Cochrane activities there³. As with Cochrane's global leadership, because of this continual representational role whatever a Director of a Cochrane Centre, Associate Centre or Affiliate says or writes could be construed as official policy. Therefore, they must be diligent in clarifying when they are speaking or writing on behalf of Cochrane and when they are *not* speaking or writing on behalf of Cochrane, and seek guidance if they are unsure.

2.3 Cochrane Review authors and editorial teams

Author teams, Cochrane Review Groups (CRGs) and CRG Network editorial teams have the authority to discuss freely the findings of their Cochrane Reviews.

However, there are times when other people in Cochrane will also speak or write about the findings of a Cochrane Review. As a general rule, when officially speaking or writing at a global level about a Review's findings, official spokespersons will be (in order of preference):

- A member of the Cochrane Review author team;
- the respective Cochrane Review Group's Coordinating Editors (or a nominee such as the CRG's Network Senior Editor);
- the Editor-in-Chief of the Cochrane Library (or nominee); or,
- a Director of a Cochrane Geographic Group.

2.4 Methods Groups

The same principle applies to members of Methods Groups. Authors of any methodology-related papers or statements that have been written for or commissioned by Cochrane are the first official spokespersons, followed by the relevant Methods Group's convenors (or nominee), the Editor-in-Chief of the Cochrane Library or Methods Co-ordinator (or nominee), and then the Director of a Cochrane Geographic Group.

³For details, see: (<http://www.cochrane.org/contact/centres>).

2.5 Fields

In a specific area of health or health care where Cochrane has a recognized 'Field', Cochrane may be officially represented by the Director(s) of the respective Cochrane Field. As with Cochrane's global leadership, this is a representational role, so whatever a Director of a Cochrane Field says or writes could be construed as an official view or policy. Therefore, they must be diligent in clarifying when they are speaking or writing on behalf of Cochrane and seek guidance if they are unsure.

3 Balancing academic freedom with membership responsibilities

3.1 Many Cochrane members and supporters are experts in a specific area of health or health care and have every right to discuss their work and express their personal views, which includes expressing dissenting opinions on Cochrane's Reviews, policies and advocacy positions. They may sometimes be asked or wish to comment on published Cochrane Reviews produced by other people. In doing so, they can speak or write freely, including expressing in a manner respectful to their Cochrane colleagues views that are critical.

This policy is not intended to control or stifle criticism or infringe on Cochrane's long-standing tradition of rigorous academic and scientific debate. However, Cochrane's members and supporters have an obligation to communicate their views on the organization's evidence and policies with integrity, respect and accountability in accordance with Cochrane's [Principles of Collaboration](#) – and statements should not be libellous or offensive.

3.2 If a Cochrane member or supporter is:

- expressing a view about Cochrane Reviews or other Cochrane content, Cochrane policies or positions, or any other Cochrane-related business; or
- commenting on evidence or making clinical recommendations from their personal and/or professional experience,

they should make every possible effort to state clearly that they are speaking or writing in a personal or other professional capacity unless they have been expressly authorized to represent Cochrane (as outlined above, Section 2).

3.3 A Cochrane member or supporter may choose not to use their Cochrane affiliation if this may cause confusion. However, if a Cochrane member or supporter uses their Cochrane affiliation along with another title, or if Cochrane is the only title or affiliation they have, then they must make every possible effort to state unequivocally that they are not representing the views of Cochrane as an organization. This cannot be implied, it must be stated explicitly in a reasonable attempt to avoid any confusion, misunderstandings or inaccurate assumptions on the part of the audience. This includes any scientific paper where a Cochrane member or supporter chooses to use their Cochrane affiliation.

For example: "This research or the matters expressed in this paper do not represent the views of Cochrane"; or: "This paper does not represent official Cochrane policy."

3.4 Use of the Cochrane logo and letterhead should be limited to statements and/or correspondence that is expressly authorized by and made on behalf of Cochrane (as outlined above, Section 2).

3.5 If a Cochrane member or supporter is speaking in a country or is being interviewed by media from a country with a Cochrane presence – and is referring to Cochrane – it is expected that they inform the Geographic Group Director responsible for Cochrane activities in that country at the earliest convenience.

3.6 In balancing their obligations to Cochrane with their academic freedom as individuals, the more senior a member or supporter is within Cochrane, the greater their obligation to clarify in what capacity they are speaking or writing: in their Cochrane capacity, in another professional capacity, or in a personal capacity.

4 Policy governance

4.1 Cochrane needs to protect its reputation and ensure clarity and coherence in conveying its official policies, positions and key messages to the world. However, the organization also recognizes that implementation of this Spokesperson Policy may – at times – be difficult, and mistakes or misjudgements in speaking publicly about Cochrane and its work may sometimes be made by members and supporters. When this happens Cochrane's Central Executive Team will work with them to rectify any problems, clarify messages and limit the damage caused as a result.

4.2 Appendix 1: 'Applying the Policy in practice' will be expanded, adapted and revised as necessary to learn from our collective experience in implementing the Policy and assist and guide Cochrane collaborators in future. Any Cochrane member or supporter who is unsure of anything in this Policy or has questions about how to apply it can also email support@cochrane.org.

4.3 Disputes about and differences of interpretation related to this Policy will be managed through Cochrane's organizational accountability structure (see [here](#) for full details). It is expected that the vast majority of problems will be solved quickly and easily at a Group level guided and supported by the Central Executive Team's Knowledge Translation Department, Editor-in-Chief and Chief Executive Officer. Cochrane's Governing Board is the ultimate arbiter of compliance with this Policy and will, if required in cases where members or supporters are repeatedly or deliberately breaching this policy, reinforce it with further action.

4.4 In addition, any Cochrane member, supporter or interested person may make a complaint about anything related to this policy or its application through Cochrane's [Complaints Resolution procedure](#).

5 Version history

Version 1	July 2015	Governing Board approved Cochrane's first Spokesperson Policy.
Version 1.2	September 2016	Minor revision by the Governing Board.
Version 2	August 2020	Major policy revision to simplify the Policy and provide improved guidance and best practice examples.

Appendix 1:

Cochrane's Spokesperson Policy Guidance: Applying the Policy in practice

Together with Cochrane's Spokesperson Policy, this guidance has been drafted to help and guide Cochrane members and supporters in their interactions with the media; or when they are asked to give their views in public on Cochrane-related issues as a representative or spokesperson for Cochrane.

1. General advice on commenting publicly on Cochrane evidence and organizational issues

Writing a blog scenario: A Cochrane member wants to publish a blog which is critical of a Cochrane Review or policy. It is appropriate to do so if this is clearly done as the member's personal opinion, with the relevant disclaimers in place. A disclaimer clearly states the blog is written to express personal opinion not a professional opinion held in their connection to Cochrane.

For example, if an author or editor wishes to feedback critically on a Cochrane Review, a good way to approach this would be to write: "I am a Cochrane author, however as a researcher into xyz, I would like to take issue with certain aspects of this review, based on my experience...." And to use the appropriate disclaimer.

This example is from [a BMJ blog by Karla Soares-Weiser](#) – in this case, she is speaking on behalf of Cochrane:



Karla Soares-Weiser is a board-certified psychiatrist with a Doctorate in evidence-based healthcare and over 25 years of experience in evidence synthesis. She was appointed Cochrane's Editor in Chief in June 2019 after working as its Deputy Editor in Chief for four years.

Competing interests: I have been a full-time employee of Cochrane since 2015. From 2009 to 2015 I managed a small business that provided research synthesis expertise mostly to not-for-profit organizations. In this Opinion I have summarized work commissioned by the Cochrane Governing Board and performed by a panel of Cochrane members that included the current Funding Arbiter Panel. My role was limited to managing the process, although I take full responsibility for its implementation.

Another example is in the [bio of Sarah Chapman's Twitter](#), which makes it clear that she is affiliated with Cochrane, but that her views are her own:



Presenting at a conference scenario: A Senior Editor of a Cochrane Review Group Network contacts Cochrane's editorial team to ask advice as they are due to present at a conference and suspect they will be asked about a soon-to-be-published high-profile Cochrane Review. Cochrane's press office should be contacted (pressoffice@cochrane.org) to help with preparation. They will seek support from the (Deputy) Editor in Chief to explore effective ways to answer questions.

Writing a personal blog scenario: A Cochrane Review Group Co-ordinating Editor is writing a blog about transparency over conflicts of interest. They are writing this personally. This is an example of someone in Cochrane exercising their right to academic freedom and debate, but they are at risk of compromising their position at Cochrane if they convey these views as Cochrane's views. Again, a well-known disclaimer should be used: "These views are my own, not those of any organization I am affiliated with." This language makes it clear it is a personal blog and not an official Cochrane communication.

Media interview scenario: If you are taking part in a media interview, you should tell the journalist you are speaking in your personal capacity and not speaking on behalf of Cochrane if this is the case. During the interview you can use phrases such as, "in my opinion..." or "it is my personal view that..."

Presenting a paper at a conference: In instances where you are presenting at a conference, when using your Cochrane title you should include statements in your slides such as, "The views expressed are my own and not the views of any organization to which I am affiliated" preferably at the start of the presentation.

There is a good example here, [from Lisa Bero writing for the BMJ](#). Another from Sara Yaron, who explains her link to Cochrane in the [opening line](#). And another from Cochrane employee, [Chris Mavergames](#), who states: "These views are my own, and not those of my employer." Hilda Bastian explains [her affiliations](#) with Cochrane in her blog on chronic fatigue syndrome.

A commonly used disclaimer you might wish to use states:

"This disclaimer informs readers that the views, thoughts, and opinions expressed in the text belong solely to the author, and not necessarily to the author's employer, organization, committee or another group or individual."

2. Advice for working with the media

Print and broadcast media

In a 24-hour news environment, there will be times when Cochrane needs to respond quickly to breaking stories. If you see a mention of Cochrane in the media that you think needs a response from the organization, please inform pressoffice@cochrane.org or the Director of the Geographic Group in the country in which the media article is published or broadcast. The press office will then work with that Geographic Group Director and/or with other members of the Central Executive Team, Cochrane Groups and the Governing Board Co-Chairs as needed to develop a response. When appropriate, we will publish, sign and date our response on www.cochrane.org so that anyone can share this information.

Social media

Social media is the term used to describe online communications channels dedicated to community-based input and content-sharing. There are multiple social media platforms, including Facebook, Twitter, LinkedIn, and Instagram. Social and multi-media channels are rapidly growing communications for Cochrane where we can share and react to the latest information quickly. The constantly changing nature of social media requires broad but clear guidance.

It is common practice to distinguish between your personal social media accounts and those of your employing or affiliated organizations. The simplest way to do this is to add a disclaimer to your profile, making clear that the opinions shared are your own (see the example disclaimer, above).

If someone runs their own Twitter account but also has responsibility for an organizational Twitter account (e.g., a registered Cochrane account for a Cochrane Group), it is best to be very clear about the status of each.

i. Registered Cochrane accounts

Stay on brand

If you manage an officially registered Cochrane account on behalf of a specific Cochrane Group, the account should be easily recognized as being an 'official' account by following Cochrane's [brand guidelines](#) (e.g., logo as profile picture, title of account, etc.).

Content

Your content should focus on information relating to Cochrane's mission, Cochrane activities, healthcare, health evidence or methodology. Communications about Cochrane evidence should present the evidence accurately and in accordance with Cochrane's [Dissemination Checklist and Guidance](#), and not make clinical recommendations.

Style

Personal touches and a relaxed style are good practice in social and multi-media communication. All communication should be polite and respectful. Given the diversity of our audience, communication should be clear and concise, and avoid slang or acronyms.

Responding to comments/conversations

When appropriate, Cochrane Groups should aim to respond to questions and comments seeking a response on social media in a timely manner. Where you feel that others in Cochrane would be better placed to respond, please direct the enquiry or comment to pressoffice@cochrane.org. All responses and direct messages on social media should be polite and respectful of others' views, even if you don't agree.

When not to respond

Cochrane Groups should not respond to abusive comments and comments not relevant to the matter under discussion. If individuals would like to raise issues with Cochrane outside the scope of the social media conversation, or have questions that would be better answered by other Cochrane entities, please direct them to alternate channels. If there are concerns about how to respond, please direct these to pressoffice@cochrane.org.

ii. Personal accounts

Do not use Cochrane's name or logo

For personal social media accounts, you may not use Cochrane's logo as a profile picture or name your social media account in a way that it may be mistaken for an 'official' organizational account.

3. Guidance and examples for official spokespeople representing Cochrane

The following scenarios provide guidance on how to find the right spokesperson to represent Cochrane. The [Organizational Accountabilities](#) policy also gives more information about line management accountabilities in Cochrane, which will guide you in finding the right spokesperson.

i. Organizational

Press release scenario: A new Cochrane Geographic Group has just been established and the new Centre Director would like a quote from a Cochrane spokesperson to celebrate and promote the launch event. In this case the most appropriate person to quote is Cochrane's Chief Executive Officer.

These press releases give examples:

- ☒ [Cochrane's Handbook launch](#)
- ☒ [Cochrane Spain](#)

ii. Editorial

Journalist enquiry scenario: Reuters has asked about a specific Cochrane Review and its status in the Cochrane Library; specifically, whether it will be withdrawn. They have asked the first author of the review and the Editor in Chief of the Cochrane Library for comment. In this case it would be most appropriate for the Editor in Chief to comment as they take the editorial decisions on the inclusion or withdrawal of reviews from the Cochrane Library, not the individual author. A statement could be made in writing (including email) or face to face. Useful advice on working with the media is available [here](#).

These pieces give examples:

- ☒ [Reuters](#)
- ☒ [Statement on Cochrane.org](#)

Journalist enquiry scenario: A journalist from Medscape has contacted the Editor in Chief of the Cochrane Library and the author of a review about its findings. In this case, as the enquiry is straightforward and about the individual review topic, the enquiry can be handled comfortably by the author.

International journalist enquiry scenario: An author has been contacted by [Reuters Health](#), asking for some clarifications about the conclusions of a Cochrane Review and if the treatment outlined is covered by health insurance in Brazil. The interview has been requested in English and the author, based in Brazil, is worried she could be misinterpreted as English is not her first language. She contacts the Managing Editor of her Cochrane Review Group for advice. The Managing Editor then suggests the Cochrane press office can advise. In this instance the press office suggests the author asks the journalist to send the interview questions over email; to write replies in English; and that the author send the answers to the press office, who can support by reading them over.

Attending a press conference scenario: A Co-ordinating Editor who is also a practising clinician is asked during a press conference, "Would you give this vaccination to your child?" They should begin with a statement such as, "As a Cochrane Review author, I cannot make recommendations, it's not Cochrane's place to do so. However, as a clinician who treats people with this disease, I would say..."

iii. **Country/Geographic**

Live TV interview scenario: A Cochrane Geographic Group has been asked to do a live interview on a local TV programme about a treatment studied in a Cochrane Review. This review was produced by a UK-based Cochrane Review Group and is not an area of subject expertise for the Geographic Group's team. In this case it may be most appropriate to decline the interview and suggest the interviewers speak directly to the authors of the review. However, it may be that the authors are not available or may not speak the local language. If the Geographic Group thinks that is able to communicate effectively on the outcomes of the review, it could go ahead with the interview, but it is recommended that the Group approaches the Cochrane Review Group and Cochrane press office beforehand to discuss the main messages of the review.

International media enquiries: A journalist from France asks the press office for help with an article about vaccinations. The press office handles the enquiry with the help of the Co-ordinating Editor from the relevant Cochrane Review Group. They inform Cochrane France on their input as a courtesy.

Social media critics scenario: A Cochrane Geographic Group had been criticised on social media and tagged in some Tweets. After advice from [Cochrane's social media team](#), they shared a link which recommends where [feedback about Cochrane Reviews](#) can be officially submitted. This link is accompanied by a standard reply, "We welcome comments on specific reviews, you can submit your comment/concerns [here](#) so that it may go through the proper channels of review and inquiry."

Publication of high-profile, impactful Cochrane Reviews and equipping Cochrane Geographic Group staff with the information they need scenario: Cochrane is publishing a high-profile Cochrane Review with contentious findings. Some Geographic Group Directors are concerned about how they should respond. In this instance, they are recommended to seek advice from the Cochrane press office, which will be working closely with the review author team, and in some instances, if it is mutually agreed, they will have the press office reply on their behalf.

If you have concerns or questions, the press office is here to help!

4. **Additional Resources for Advice & Guidance**

- [Official Cochrane Policies](#)
- [Guidance on Knowledge translation within Cochrane](#)
- [Working with the media and press releases](#)

- [Journals](#)
- [Social media guide and blogs](#)
- [Presenting in person](#)
- [Supporting policy makers](#)
- [Cochrane's Dissemination Checklist and Guidance - new](#)
- [Common language used in disclaimers examples](#)