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*In this episode, Taren Grom, Editor-in-Chief of PharmaVOICE Magazine, meets with Kate Cronin, President, Ogilvy Health.*

**Taren:** Kate, you have an impressive 20 years of experience in PR healthcare marketing and 16 of those at Ogilvy. What are some of the biggest shifts you've seen in terms of healthcare advertising and PR over the last 20, 25 years?

**Kate:** Thank you for having me on the show, Taren. I'm delighted to be here. Twenty-five years does feel like a very long time, it seems, because it is. In that time, there has been so much change that it's really hard to pin it down to just a few. But I can start off with the fact that in healthcare advertising and PR, we are seeing the spend just continues to increase over the years. I think that the increase is attributable to not just pharmaceutical companies spending, but hospital systems are now spending in advertising and PR at a rapid rate. In addition, there are disruptors in the market. If you look at Amazon and Google, they weren't there years ago. So I think that the influx of data and technology is something new and it's really changing the way we do our business.

There's also the blending of discipline. Years ago when I joined, I was in PR. PR was separate from advertising and other disciplines. And now, what's happening is the way we communicate is through the blending of disciplines where advertising, PR, digital, social, are all part of an integrated ecosystem. No discipline sits alone so they support each other. So our plans are now demanding, not asking, but demanding that different agencies stick together, discuss the strategy and then come up with solutions that can be discipline agnostic, but ultimately are then deployed by each agency. So that, I think, is a change from years ago where everyone is working in their own silo. You didn't really talk to the ad agency if you were in PR. They were viewed as separate.

I also think that the rise of digital and social over the years have contributed to a big change in healthcare. Healthcare advertising and PR were sort of slow to the gate in terms of utilizing digital and social platforms. But now they're there and they're embracing these platforms to reach audiences, to reach patients, physicians. That includes doing more initiatives with Facebook and Instagram, working with content

engines, like new content engines that didn't exist years ago, like Reddit and Refinery29, to get healthcare information out. In fact, it's funny, the men in my household actually go to new content engines like Deadspin and Barstool Sports, and I was thinking maybe I can reach them with men's health messages. Those are new interesting platforms that maybe we haven't gone to before. So, getting creative about healthcare information and reaching folks in new ways, that's really changed a lot over the years.

And then people are getting their information from disparate places. I think that the news, it used to be the *New York Times*, the *Wall Street Journal*, that's where you got your news. Now, you're getting your news from all these digital platforms. Some people just read Twitter and get their news from Twitter. Some people get it from Facebook and some people actually get it from micro-influencers. So the whole world has changed, and the rise of these platforms and the focus on snackable bites versus reading long-form articles, and we have to communicate now in snackable bites. Some people do want long-form articles and we can create that as well. So I think that is a big change since when I started.

Then finally, I think another area is just a rise of data and analytics. Years ago we didn't have the data and analytics that we do today. Now we can deploy that to figure out are we reaching the right person, are we reaching the right customer, how do we deploy it, do our tactics work, are they making sense, do we need to revisit and pivot, can we be nimble.

So these are all things that, again, didn't exist back in the days, like I was in the dinosaur age. I'll really not that old, but I do have a TikTok account, Taren. I just wanted to share that with you. So I am new and hip. I'm a hip mom.

**Taren:** I love that. I had to have my nephews explain what TikTok was to me, so, I am not that hip. It seems like we are moving faster and faster. It's accelerating at an exponential speed. Twenty years ago, we were still talking about the importance of journal ads and now here we are, it's not even that long ago where we're talking about whole new platforms as you just described. So, where do you see going in the next 5-10 years; what trends are you keeping your fingers on right now?

**Kate:** A few things. We're watching all the different platforms that are launching. Some of them have a meteoric rise. TikTok is an example of having a meteoric rise. Now, I think there are obviously targets, the younger audience, for sure. But also there's questions around the ownership of TikTok and whether or not this is something you should get involved with. But other than that, I mean, I think that there are other things that are happening that are shaping kind of the future. The hot trends include

the rise of behavioral science in shaping communication strategies. If you look at behavioral science, it can actually feed your strategy for communication. I'll give you an example.

We work in the vaccine space. As you know, there's a huge contingent of anti-vaxxers who are out there and it has caused an influx of measles, mumps, diseases that you thought you weren't going to see again are now back because of anti-vaxxers. So just telling people that vaccinating is good for you isn't enough to necessarily get them to do it because of all their concerns around safety. So we use behavioral science to help feed our approach. Part of that approach was looking at the physician and the physician's role. We found that if a doctor equivocates on a vaccine – so if you press the doctor and say 'do I really need this vaccine,' if the doctor equivocates then you may be less likely to get the vaccine or take the vaccine. If the doctor is more firm and explains that yes this is an important vaccine, you should have this in your arsenal, you're more likely to do it. So that is one example of how behavioral science can feed an approach – the role of the doctor. Part of that can be training the doctors in how they communicate with their patients when it comes to vaccines. So that's one way that I think over the next 5-10 years I think behavioral science is going to play an integral role across all healthcare communication.

I also think that the rise of the micro-influencers as well will play a big role. I think there are a number of micro-influencers in health and that can be a micro-influencer when it comes to things like mindfulness or mental health or addiction, where they actually can influence change more than perhaps a large campaign could.

Then finally, one of the things we're seeing, and I think is going to be a continued trend and this – as we were talking earlier, Taren, the importance of brands doing good and communicating the good that they're doing. I think people, patients, consumers, look at brands and say if this is the company that does good I'm more inclined to buy this product or I'm more inclined to like this company. It's not just about doing good because you have to, it's doing good because you really need to show you're making a difference in the world. And so I think a lot of companies are now more focused on that than ever before and in the healthcare space.

**Taren:** It's interesting and I think when we think about COVID and all the tragedies that are involved with it, but one of the silver linings is that people are becoming more involved in clinical trials, for example. They're understanding the science in a greater detail. So we may see that shift into companies and as a result, the pharmaceutical companies' reputations are starting to rise again, which I think is a positive to come out of all of this tragedy.

**Kate:** Yeah. I would actually say I was on a Fortune Brainstorm Health conference call this morning, a Zoom call, and this came up. Julie Gerberding from Merck was speaking. One of things she said is, for years, pharmaceutical companies have suffered and been at the bottom of the ranking in terms of trust of industries. Literally after banking I think pharma came last. And now this is an opportunity for them to shine, and I think the race to find treatments, the race to find vaccines gives pharmaceutical companies the opportunity to rise above it and to show their value to society. I think the point was a very good one. I think that this is really a great opportunity for them to continue to show that they're delivering for the health and wellness of society in this COVID world.

The other thing, when we talk about what's going on in relevance in the world we are in today, with Black Lives Matter and racial inequalities and underserved communities, I think that there's going to be more of a focus in the healthcare community about access and access to medicine, access to improved care, and communicating that access very aggressively. Because in the past, and I remember years ago, Taren, when I was working in a campaign and we had one component of it, I think it was in hypertension – one component of it was the multicultural communications component, and a very small budget for that when, in fact, the people who suffer from hypertension tended to be from the black Hispanic community.

Now, I think those days are over, thankfully, where marketers understand they need to actually spend against that category to reach those people. They need to go where those folks are and not just set aside a small component of the budget to reach them. So I think it actually is a change for the good, and I think that's going to continue over the next several years.

**Taren:** Agree, and I think that's going to blend back into that clinical trial space too and looking at more diverse populations to bring people who are going to be the end users of these drugs into those clinical trials and increase that diversity and that patient pool. So again, I think that's a great step forward. We can talk about public health issues going all the way through and how that resonates in terms of where we are today as a society as well, but we don't have two hours. We can talk about that offline some more. I'd love to discuss that with you.

Let's talk about some of the successes you've had in terms of launching brands and you've done so for a number of different companies. Given the trends that you outlined earlier and the converging of so many media in which a campaign has to now touch, if it's digital, online, print, whatever it may be, what are some of those key factors that are

integral to a successful launch? Has that changed or are the principles still the same, or do these need to evolve as well?

**Kate:** Yeah, that's a great question, Taren. I think the principles have remained the same, but I think there's a lot of noise in the system with all of the different channels that are out there. We used to think digital was its own silo. In fact, Ogilvy at one point had an Ogilvy digital operation under it and now digital is just across everything. And so I think if you look at that's changed since several years ago, but if you look at launching product, you have to cut through and figure out do you know your patient, do you know your customer basically, how well do you know them, what is the journey that they're going on, and where are they getting their information, and then from there mapping out what your communications plan will look like.

I think also a lot of scenario planning fits in as well in terms of regulatory milestones; that's always been key to a successful launch is having your scenario planning mapped out. But as I mentioned earlier to you, the IAT model (integrated agency team model), is really important because those touch points within a patient journey are different. It could be whether they're watching TV, whether they're old school, I guess we call it and watching TV versus a Roku; whether they're getting their information from their mobile phones or whether they're getting it from an iPad; understanding where they're getting their information and then where they're going, and there are so many different places that they go to.

As I mentioned to you, my husband and my son, Deadspin and all these platforms that I don't really go to. So, knowing where they go and then reaching them with the right information at the right time. I think those are all the same pillars of how you launch a product and now I just think there's just more of them to sift through. And understanding where they get their news, who they trust, those have all changed because the rise of the micro-influencer and the macro-influencer, that could be where they're getting all their information from. Ten years ago you didn't have micro- and macro-influencers. Ten years ago it was they're getting their information from their doctor or they're getting it from a journal or they're getting it from a newspaper or they're getting it from TV, right?

**Taren:** Right.

**Kate:** That was like four or five places. Now contrast it to today where it could be 30 or 40 places. I mean, I can't tell you how many different places I get my information on. There's like probably still about four or five of my trusted places where I go for health

information, but we have to figure that out. And then where do you make your investments as a marketer, what are the best choices for making those investments? So, it's a bit harder now because it's a much bigger space that we're playing in.

**Taren:** Sure. You sit in a seat of influence in the industry, you had a call this morning with Forbes and with Julie Gerberding. So you obviously have some influence in the industry. Where and how do you exert your influence to – I don't know – effect change?

**Kate:** When I'm talking to a senior client and I'm having a discussion about what they should be doing, I use that as an opportunity to talk about what's going on culturally and relevant, and making them understand or helping them, I should say, understand why they should be doing certain things.

So, for example, if a client has a budget set aside and I truly believe that part of that budget needs to go to serving underserved communities or focusing on access and communicating around access programs, my job, as I see it, is to make the case to that client to explain why they should care. Because I'm seeing across the board what all the clients are doing and what companies we work with are doing, and I'm able to make the case by showing and benchmarking what others are doing, and I think that's an important role to play. I think also helping clients who are senior women helping them grow. A lot of what I do is also working with my senior clients who are women and helping them elevate themselves within the organization or their own visibility within the healthcare communications arena.

So I like to do that when I can. I think it's an important part of my role at Ogilvy. I also get a lot of satisfaction out of doing that.

**Taren:** That's a great lead into my next question, which is I understand you are a founding member of Ogilvy's Women's Leadership Professional Network and a member of WPP's Women's Leadership faculty, or as you call it WLP. So let's talk about why mentoring women is so important to you and then we'll go into how Ogilvy Health is addressing gender diversity, as well as diversity and inclusion.

**Kate:** I grew up in a military household. My father was a colonel in the Army and I grew up at West Point. Interesting background, it was all men. There were some women. When we moved to West Point, I was a kid and that year was the first year they accepted women. I remember walking through the campus and seeing the women at West Point. At the time, they were not allowed to look feminine at all. It just struck me

that what they did is they accepted women but they were molding women to be like men. For some reason that stuck in the back of my head.

I ultimately was invited to go to West Point. I was a swimmer and they tried to recruit me to be on the swim team. I thought, well, I don't want to stay here at West Point and I also don't want to be a woman and look like a man, so I ended up going, oddly enough, to a women's college. I found that at a women's college I had a lot of freedom because women were in charge. Women were on all the committees. Women were the only sporting events, so women came to support women and it was a fantastic experience.

I actually spent my junior year at a co-ed school, I was pre-med, and found that my lab partner was always trying to take over. And I thought, well you're not going to take over this project we're doing, we do it equally.

**Taren:** I love it.

**Kate:** I remember I was thinking that would never happen at Smith College. At Smith College women are in charge. So anyway, that mentality kind of stuck with me.

It's always been a focus of mine to help mentor other women and grow other women. If you look at my leadership team, they're mostly women. I get a lot of joy out of having mentored women. Over the years, I've mentored women who have gone on to run their own healthcare practices. In fact, four of them went on to run their own healthcare practices. I am very proud of that. I'm sad that they left, but proud that I had something to do with them going on and growing their careers.

I think it's important to mentor women. I think we should give them the same opportunities as men. I have two girls and I want to make sure that they get all the same opportunities that my son does. I think that it is important to show that you can have it all. Maybe you don't do it all well. Maybe some days you do it well, some days you don't. But I think there's a lot of pressure on women.

I know that I guess about 10 years ago – maybe less than 10 years ago, I noticed that women were dropping out of healthcare communication or advertising or PR at a certain stage. They were dropping out because they were having children and they felt that they couldn't do it all, and I strongly encourage them to stay. I encourage them to stay with what you need to be successful, that was the question. Do you need three days a week, four days a week, three at home and two here, whatever. I'm very flexible about that because I get it, it's not easy and everyone has challenges being a mom and working.

As Shelly Lazarus, who's my mentor, once said to me, 'you're never going to be perfect.' Basically, 'you shouldn't worry about the dust bunnies that are building up under your bed because that doesn't matter. Worry about what matters.' I think I've taken that to heart and I try to instill that with other women.

I remember one point a couple of years ago, we had an intern who asked me to coffee and I said sure, I'd love to get a coffee. We went downstairs, and I was telling him about my focus on mentoring women – although, I mentor men too. And he said that it was interesting because there was a woman who was an intern sitting next to him and she asked him 'how did you get coffee with Kate,' and he said, 'I asked.' And I thought that was just so true because as women we worry 'well, if she says no, I don't want her to feel in this position where she feels she has to say yes.' So I thought that was just very enlightening because men don't generally think like that. Yes means yes, no means no. If you want, you get a coffee; you want to get a coffee or not, that's the answer.

Anyhow, that's my focus on mentoring women.

**Taren:** That's great. We're looking at diversity and inclusion across the industry now with a finer focus including women and figuring out how to bridge those gaps. What is Ogilvy doing specifically in terms of looking at diversity and inclusion with your work?

**Kate:** We're taking a hard look at diversity and inclusion and we've had D&I chief diversity inclusion officer for years, and she's done a fantastic job but we know there's a lot more work that has to be done. Particularly in the numbers that we see, it's not where it needs to be. I think for the work we did with Women's Leadership Professional Network, WLPN at Ogilvy, we've done some great work. We've fostered and grown a lot of women. We also had a program called "30 for 30" which is 30 men partnered with 30 women and then being sponsors for women. I was in the inaugural class of 30 for 30. Now, what it's become is 30 for 30 is 30 women – not all women but a lot of women – sponsoring 30 women leaders. The beauty of the sponsorship program was that the men would learn from the women, like what are the struggles that they deal with. Obviously, the men then would also kind of instill some of thinking to the women. So we use that program as more of a partnership program to grow women leaders.

And then we have our D&I team that does a lot of initiatives around diversity and inclusion for young professionals, for people of color. We have several affinity groups within Ogilvy that have programs specific to those members. I think that we've come a long way. But as we look at the numbers, to be honest with you, we're nowhere near where we should be. I think this Black Lives Matter movement and highlighting racial

inequalities has awakened everyone in the industry to the problems that we have in this area in particular.

**Taren:** That's great. Let's look to the future where those numbers start to become more equitable. So, better days ahead let's hope.

**Kate:** Yes. Exactly.

**Taren:** When you look to building your teams, what are some of those qualities you look for in terms of bringing people along to that executive level?

**Kate:** I think the qualities that shine when I'm looking to move folks up is fearlessness, ability to ask questions without worrying how you look of 'is this a dumb question?' Just ask questions. Curiosity. I think if you're curious, I think that goes a long way because, again, that gets you to learn more. And I say if you're uncomfortable, that's a good place to be. If people are happy to be uncomfortable and try new things, they are definitely ready to continue to move up into the C-suite. Conquering your fear or conquer your complacency, frankly, because I think that can be an issue as well when you get too comfortable.

I've been with Ogilvy for 16 years and I've had so many different jobs really within Ogilvy, even though most of it has been within health and PR, the roles have changed every two or three years in terms of the responsibilities, and I think that keeps me uncomfortable. I encourage anyone who wants to move into leadership roles to do that. Don't get complacent. Be fearless. Be curious. Hard work gets you far for sure.

I just had this conversation with my daughter the other night. She says hard work should be enough. I said it's never enough. Anybody can work hard.

**Taren:** That's right.

**Kate:** That is not enough to get you to the top. It's that curiosity, it's the fearlessness, all of those will get you up there.

**Taren:** Perfect. Any specific advice to women who may want to look to that C-suite if those are the table stakes of getting up to executive level, but what are some of those unique challenges that maybe women face?

**Kate:** I think for women to get in the C-suite, find a sponsor. Because as you know, you look at the executive leadership teams of large companies, it's still mostly men, mostly, I

would say not as diverse as it should be. If you want to move up the ladder, find a sponsor who is sitting at that table because that's the key. If somebody says 'I was talking to Jane Doe and she told me she's interested in this, we should put her name in.' Those conversations are happening in the boardroom maybe, and if they don't know who you are and you don't have somebody representing you, it's very hard for you to be heard. So that's why we had this 30 for 30 sponsorship program at Ogilvy. It's basically about making sure that someone at a high leadership level is aware of your wants, your needs, your desires, your abilities, and is able to work them in that room for you. So, that when that big job comes up or running a country or running a network or whatever it may be, somebody put your name in the hat because you've built that relationship with them, you've asked them to be your sponsor. And don't be afraid to ask for someone to be your sponsor because quite, frankly, I think they'll be flattered.

Again, if they say no, they may recommend someone else who should be your sponsor. So you can always ask. That goes back to the fearless, because if you are fearful, you're not going to ask the question and it's not going to create that cadence that needs to happen to get you to where you want to go.

**Taren:** Perfect. Let's think about in terms of your career. Is there anything that you know now that you wish you had known as you were moving up the ranks. Like you're giving great advice out there to folks who are listening to this podcast who have those C-suite aspirations. But if you could go back and do something differently, is there something you know now that you wish you knew then?

**Kate:** Yeah. If I knew then how approachable leaders are, I would have done it. I think originally when I was much younger, I had a fear that 'oh, I don't want to waste someone's time' or I don't want to impose or force them to answer that question of will you grab lunch with me or a quick meeting or coffee. So that's why I really highlight that so much because it's the one thing I should have done much sooner, and I think I probably didn't think that it was something I should do. The sooner you get that embedded in your head, the better. That's what I would recommend.

**Taren:** Perfect Kate. That's perfect. And finally, tell me about an accomplishment or a wow moment that shaped your career or changed the trajectory of your career or something that left a lasting impression on you.

**Kate:** I'm going to go way back with my wow moment because I was quite young and I was working with the C-suite of, at the time, SmithKline Beecham. So I was working with Jan Leschly, JP Garnier, their head of regulatory, their head of medical. I was dealing with Rx-to-OTC switch of one of their products. Literally, it was me going down

to Philly, working in a boardroom with the C-suite on a weekly basis to develop a presentation to the FDA as to why they should switch this product. And I remember one of the presenters getting up and I corrected him on a slide – this was in a rehearsal. I remember the CEO turned to me and said, ‘that is a great point, none of us ever would have thought of that.’ It was something like that. The words I’m probably not getting correctly, but I do remember that moment thinking that I was valued regardless of how young I was, that the head of this large company actually respected me. I’m working with them weekly. We went down to the FDA for the hearing and we sat in the audience while they’re about to give the presentation. I remember the head of regulatory was having a problem and I got up from the audience and I helped him with his slides. I sat back down and my client basically said to me or said to my boss at the time, ‘that’s a career maker moment for her.’ And I remember thinking that, it was, because it built my confidence.

I actually ended up getting an award from SmithKline Beecham. They named a star after me. And Taren, I have never found the star. It was one of those cheesy things where they name a star after you. But I remember and I will never forget it; I went up on stage, the CEO gives me the star for all my work with the switch and I sit back down. And Shelly Lazarus is sitting next to me and she said, “Congratulations, that was a wonderful thing.” I looked at her and I was like ‘thank you.’ And then years later, I ended up working with Shelly and she became my mentor and boss. I will never forget that because she was there when I got my star.

**Taren:** That’s awesome.

**Kate:** It’s hokey, I know. That was my wow moment. I knew that confidence was everything, and not being afraid to say what you need to say, even though you’re with like the top people in a company and you’re just a kid, say it, because it’ll give you the confidence. And if you’re wrong you’re wrong, but if you’re right, it goes a long way in building your confidence.

**Taren:** Kate, thank you so much for sharing that great story, and it just shows the importance of confidence as you say, and recognizing that you have a voice and you should use your voice. Thank you so much too for sharing your insights in terms of the trends and what we need to be looking for as we go forward into some uncertain territory in the next 12 to 24 months as we all come out of COVID in terms of what’s influencing healthcare advertising and public relations. So, thank you so much for your tremendous insights.



**Kate:** Thank you so much for having me, and I enjoyed chatting with you. I hope you have a great week.

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