

INTERVIEW

Physician and Influencer “Mama Doctor Jones”

An Interview with Dr. Danielle Jones, MD

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Dr. Danielle Jones, AKA Mama Doctor Jones is an “OBGYN and mom to 4” and a widely-known influencer on YouTube, Instagram, and TikTok. She uses her platform to teach about sexual and reproductive issues, as well as to empower her followers to seek reliable and accurate health information. Dr. Jones is also the co-founder of the Pinnacle Conference, which was created to advance the “personal leadership, negotiation, and life balancing skills” in female physicians. Dr. Jones is also a practicing obstetrician and gynecologist. You can find her on Instagram: @MamaDoctorJones, YouTube: MamaDoctorJones, Blog: <https://mindonmed.com/>, and the Pinnacle Conference: <https://pinnacleconference.org/conference-2020/>.

You have talked about your background on your YouTube channel and in your blog. Can you give our readers a brief overview of what you do and how you came to do this?

I started out on social media as a medical student. That was in 2009 and social media wasn’t new and unique at that time, but it was definitely new and unique for somebody in medicine to be on social media or blogging as a person in medicine, so it wasn’t super well received by the people around me. I didn’t care, I felt like I could see the potential. I remember distinctly a conversation

with somebody at my school and me saying, “Listen this is my traveling CV. I know I’m doing good things on the Internet and it’s going to go with me.” So when somebody is mad and writes a terrible review about me because I didn’t order the MRI that they thought they needed [...] and someone else Googles me, they’re either going to either find it or if they find it they’re not going to be fazed by it because they can see who I really am – because I’ve been consistently sharing that online for a long time. And then on the flipside of that there’s a ton of misinformation on the Internet and I have now put myself into a position where I can make a difference in some of it, and I think that’s super important. It was my creative outlet. That was kind of paired with Twitter.

And then I went to residency, I had my kids – I had my twins at the end of med school – and then I was so busy and learning to be a doctor and focusing every ounce of my energy on being a good doctor and learning everything I could and then every other second I was at home trying to learn how to be a mom and do that well also. I just kind of fell off of social media altogether.

Then 4 years later I got back on and exactly as I predicted everything was still there and so are a lot of my people. So I started an Instagram page and immediately a handful of people who had followed me on Twitter and the blog found it and were just thrilled that I was back to

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writing and I was thrilled to see them again and it was like a reunion. I had decent growth just from talking about Instagram for some reason. Instagram just really resonated with people. It kind of took off and I saw the value that video content was adding to people's lives and asking questions and answering those questions.

I think I've taken a little bit of a different persona online than some doctors do, you know. Some other doctors [...] talk to people like as an expert, "here's the information," which is great because they are and they should be. But I've kind of taken it more like "Hey I'm your friend, I'll give you good information and when something comes up you can ask me about it and we'll just chat." I want to be more in that space than in the doctor space because [...] it's just not me and people seemed to really resonate with that. So, I thought, "I'm going to try this YouTube thing, I'll give it 6 weeks see how it goes." And man, I feel like I fill the space that I think I didn't know needed to be filled but people were just waiting for someone to fill the space on OB and pregnancy things.

So, you talk about very taboo subjects on your channel or know subjects that are culturally taboo. How do you navigate that?

Yeah, they're culturally some things that people have a hard time talking about, but I think because it's so normal to me it's not a big deal. And it's when I'm talking just to my camera in my room where I film it's just like I'm talking to a patient one-on-one at work. So, it's not hard for me, it's normal for me. And I think that people watch [my videos] and see how it's just very normal for me to talk about it and then they think, "Oh, maybe this is OK." Navigating how to do that without getting the video taken down has been hard. It does get caught by the AI system on YouTube quite a bit. I don't care about monetization for the money, I care about it because it also suppresses the views and most of the time those are really important things like talking about purity culture or talking about vaginal steaming, or vaginal detox. These are important things and they get seen by less people because of the topic. So, I'm working on getting around the algorithm because I know its good content and YouTube has echoed that by leaving things up even when they get flagged [by the AI].

How does your media presence and what you talk about on YouTube influence your day-to-day patient interaction?

I read people's accounts on social media of miscarriage and how their doctors treated them, and I feel like I learned a lot about how I interact with patients specifically. And YouTube has also helped me really see how I say things and how it is interpreted because sometimes



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I'll say something in a video that I feel like sounds fine and I'll get a few comments that are like, "Oh you know that kind of hurt my feelings," or "Have you ever thought about this or that?" and it's really good feedback. I feel like it's made me very cognizant of the way that I present information to people and how thorough I am with informed consent and with expectations for procedures and medications.

And then on the other side, I know a lot of my patients follow me on the Internet now, which is great because I've never posted anything online that I would be ashamed of my patients seeing or that I wouldn't want them to see.

And then it's a good marketing tool. I definitely have patients who come in from other cities to see me and who make appointments ahead of time to come and chat about things that they found they didn't get good information [from] somewhere else and so it's been great for that reason as well.

Who is your intended audience for these videos? Is it the general public or do you have a specific audience?

At Pinnacle just this past weekend we taught a course on establishing your brand online or your social media presence, and the first part of that is asking "Who is your avatar? Who are you talking to?" I've had a very defined Avatar: [...] a reproductive-aged person who is looking for information, likes to Google their symptoms, likes to Google their treatment, likes to Google their doctor. I am talking to that person because that person tends to find information and not always be 100 percent sure how to digest it and interpret it. I want them to find my information so that they can both have a source of good information but also learn how to be critical of information that they hear on the Internet. Something I hope people hear over and over on my channel is I don't want you

to believe everything I say: I want you to know how to critically assess it because people read so many articles all the time and go “Hey, I heard this on your YouTube channel I don’t agree with it. Here’s why” and I can say, “I just haven’t seen that yet.” We’re all always learning and that’s a great thing to do. So yeah, it’s the person who looks up their health information online and wants to learn, but you know, maybe a little bit more entertaining way to do that. And then I like to make people laugh and I hope that sometimes I’m also doing that.

What challenges arise from being a social media presence and how do you work through those challenges?

It’s getting more commonplace where people who are in medicine have a social media presence. Some of the biggest challenges are just getting the people I work with in real life to understand why I’m spending my time there. Early on in the job that I’m at, some of the nurses complained because my social media was a “HIPAA violation.” Nothing I’m doing is in any danger of violating a patient’s privacy, that’s been my number one, utmost concern since day one on the Internet. But because people don’t always understand what you’re doing and how you’re doing it they sometimes can kind of get ahead of themselves and not really take it all in and maybe a little bit not nice about it. Usually I think if [people] take the time to really look into what it is that I’m doing they see the value.

And then time management. Obviously, these are all huge time commitments and to do a good job running all of them I have to have time to spend doing it. So, it’s been a process of figuring out how much time I need to dedicate or want to dedicate to all of these mediums.

So, what was your goal in developing this conference and what needs were you trying to meet?

That’s an excellent segue into Pinnacle because actually the other three people who helped me with Pinnacle I met through Instagram. We met in January of 2019 and by December of 2019 We had put on this incredible empowering life-changing weekend of a conference for CMA credits for women in medicine. The whole basis came from a conversation just where we were all jointly commiserating over the fact that we don’t really get much training on the business side of medicine and owning a practice or negotiating contracts or protecting your intellectual property, things like that. Rupa Wong, who is one of the other co-founders, said, “I had this idea that we should make this conference around that and maybe you guys would be the right people to do it.” And in my head, I was like, “Yeah that sounds great we could do

that. That’s a good idea.” And then two days later she’s like, “we’re going through the paperwork,” and so I was like, “OK I guess really doing this.”

So, we just wanted to empower women to have some more of those tools because it’s a different beast to negotiate as a female and you can’t deny the fact that *it’s just different*. And it was just a really great opportunity to both network and unwind and learn, and I’m still kind of blown away at just how incredibly needed and wonderful it was. If you’ve been to conferences and you go by yourself and you don’t know anyone it’s so uncomfortable. It was none of that, even though most of us didn’t know each other because everybody had a little personal knowledge of each other and we got to kind of skip right past the, “Where do you work. Do you have any kids? What’s your specialty?” and go right down to like really intimate informal vulnerable life-changing conversations, and I think it’s because of Instagram and the rest of the Internet.

You talk about mentorship occasionally on our YouTube channel and in your blog. We have a lot of people who are readers who are premed all the way through practicing physicians. How do you approach mentorship, and do you have anything to say to our readers who are at any point in that medical journey?

Another big reason that I ended up really committing to being visible online was because when I was trying to choose to go into a specialty I almost talked myself out of choosing this field even though I definitely loved it more than everything else. So many people said you can’t be an OBGYN and have a family that you actually see, your nanny’s going to raise kids, you’re never gonna be around, you’ll get divorced in residency. These are things that people actually said to me out loud and tried to get me to not choose OB and I was terrified because I couldn’t see anyone who did it and didn’t have that outcome so I just only had these people saying things to me. So mentorship I think can take on many different forms and one of those forms I think can come in just finding people or doing what you want to do and who look like you want to look like in 5 or 10 years. I always love working with the medical students here to develop relationships with them and hopefully encourage them just to follow their dreams.

I think there’s also a role for mentorship on the Internet. I encourage people not to just send a bunch of cold emails to whoever they find and immediately do that because I get an unimaginable amount of emails from premed and med students, and while I would genuinely love to just give a really great response to everyone, it is impossible. So if somebody is following me and interacting with me a lot and asking questions on places and I see them coming back consistently, I’m much more likely to be able to pick up on the fact that those names

are the same and respond to a genuine question than I am if someone just cold emails me. I would never hesitate to be like, “Yeah, I have to round at 7:30 if you can meet me at 7 for coffee.” It’s important. It’s important to have people who support you and doing the things that you want to do.

If there is one thing you want your viewers to take away, what is it?

I think if there is one thing I want people to come to my channel and take away... One is to be true to yourself and to live your life however you think it looks to you and your family. And the other one is to be critical of the information that you’re taking in and that at the end of the day if you’re not sure who to believe it’s probably best to hold back on believing someone who isn’t truly an expert in the area and you learn how to interpret that information. When you’re getting it online I can hopefully help with that on all of my mediums.

Thank you for your time, Dr. Jones.

And, as MDJ says, “Be kind to yourself, to each other, in the comments, be kind, and [we] will see you next time.”